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MINISTERS OF MERCY

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FREDERICK LEIGHTON PENNELL,
OF THE AFGHAN FRONTIER.

"THE ADOPTION OF NATIVE DRESS WAS MERELY AN INDICATION OF DR. PENNELL'S DEEP DESIRE TO MAKE HIS LIFE BLEND, IN EVERY POSSIBLE WAY, WITH THAT OF THE COMMON PEOPLE."

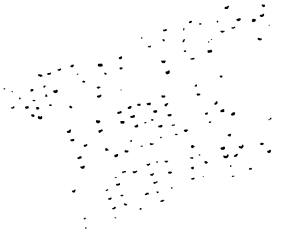
Jan.

MINISTERS OF MERCY

BY

JAMES H. FRANKLIN

The Son of man came not to be ministered unto, but to minister.



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MISSIONARY EDUCATION MOVEMENT
OF THE UNITED STATES AND CANADA

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DEDICATED

TO

MANY MINISTERS OF MERCY

WHO, IN THE FIRST CENTURY OF MEDICAL MISSIONS, WENT EVEN TO THE UTTERMOST PARTS OF THE EARTH TO SERVE SUFFERING HUMANITY, IN THE NAME AND SPIRIT OF THE

GREAT PHYSICIAN

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FOREWORD

IT is not inappropriate that, on the one hundredth anniversary of the sailing for India of the first medical missionary, we should turn our thoughts toward the many Christian physicians who have gone into lands where, on account of ignorance and superstition, human suffering is greatest.

Although others with a knowledge of Western medicine had preceded him in missionary service, it appears quite clear that John Scudder, who sailed for India from Boston, June 8, 1819, was the first appointee whose ability as a physician received serious consideration. It seems quite certain that, though other physicians had gone out before Dr. Scudder, not one of them considered himself a medical missionary nor used his knowledge of medicine except incidentally, if at all.

At the beginning of the modern missionary movement, many Christians believed that their interest in other races should find its expression almost exclusively in the oral preaching of the gospel. Now it is known everywhere that medical missionary effort is one of the most useful forms of service.

The author has had opportunity to observe med-

ical work in various parts of the world, but not until he was asked to read rather widely in the preparation of this small volume, did he really appreciate to what an extent the medical missionary has often been a national figure, as well as a pioneer in the establishment of medical schools in non-Christian lands. As we face the task of strengthening a sense of brotherhood between great continents, it is evident that the medical missionary will continue to be one of the most helpful and influential forces.

In the face of such a wealth of material, the author would have found it difficult to determine which of the many notable missionary-physicians to present in the ten chapters of this book. Fortunately, the characters were selected by a committee of the Missionary Education Movement.

It is not possible to recite here more than a few details of the life and work of each character, but the small volume is sent forth with the earnest hope that it will arouse in its readers a desire for a wider acquaintance and closer fellowship with MINISTERS OF MERCY in many lands.

JAMES H. FRANKLIN.

BOSTON, MAY, 1919.

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Young Theodore Pennell loved books, especially books of travel and adventure. "Robinson Crusoe" was a favorite. He loved nature, and his soul seemed to crave the wide spaces of field and sea and sky. His grandfather, Swinfen Jordan, was an enthusiastic naturalist, and the boy found great delight in helping him collect and classify botanical and geological specimens. He was mentally alert and showed an especial fondness for the sciences, which made his medical studies easier and more agreeable to him.

At fourteen years of age Theodore's health improved rapidly, and he soon developed a fondness for outdoor sports that helped to fit him physically for the hardships he was to endure on the borders of Afghanistan, and to qualify him to direct Afghan schoolboys in their athletics. Before leaving England, he had made himself useful in work for young men, organizing the Working Lads' Institute, to the welfare of whose members he devoted himself in many helpful ways. Before going forth as a missionary, he had demonstrated his ability to serve.

Despite his numerous interests and activities, Theodore proved himself an excellent student, and in the winter of 1891 he received his degree of doctor of medicine, winning the special distinction of a gold medal.

After thus preparing himself for medical missionary service, he placed himself unreservedly at the disposal of the Church Missionary Society, to go wherever his help seemed most urgently needed. He felt that he himself should make no special choice, although he was going at his own expense. He was sent to Northwest India, on the very borders of wild Afghanistan, where missionaries were not permitted to enter. The fierce Afghans (often called Pathans) who overflowed into India offered a difficult field for missionary effort.

When the time came for leaving England, his mother, whose greatest hope had been that her only living child would become a foreign missionary, could not endure the thought of permanent separation from her son. It was arranged, therefore, that she should accompany him (she also went at her own expense) and take up her residence in India at the same station with her son. They sailed in October, 1892, and landed at Karachi, the extreme western point of India, a few weeks later. In time they were sent northward about six hundred miles to the Bannu station of the Church Missionary Society, about twenty miles from the borders of Afghanistan. Mrs. Pennell's devotion to the cause of missions, her intellectual culture, and her strong Christian character qualified her for eminent usefulness among the Pathans of Northwest India.

The Afghans, many of whom claim racial descent from the Israelites, exhibit a strange combination of cruelty, revenge, treachery, vanity, dishonesty, tribal jealousy, hospitality, and religion. The vendetta, or blood-feud, is so much a part of the life there that it has been said, "The Afghans of the frontier are never at peace except when they are at war." Across the border from Bannu, few of the Afghans dared go out of their houses without their rifles on their shoulders, ready for instant use, so common were the blood-feuds. Perhaps no passion is stronger with the Afghans than the desire for revenge. Frequently, because of these blood-feuds, whole families are sometimes on the verge of extermination, but those who remain feel that more murders must be committed to uphold the honor of the group.

In Dr. Pennell's hospital, patients would occasionally request that they be placed in wards whose windows did not open on a public road, lest some enemy fire on them. On one occasion, a father brought his son to the hospital, with the boy's thigh completely shattered by an enemy's bullet. When told that amputation offered the only chance to save the boy's life, the father refused to permit it; he declared that, if his son were to die after the operation, people would say amputation caused it, and he would thus forfeit the right to shoot the mur-

derer of his son. The unfortunate sufferer was carried away to die, so that his father might have the right to kill his son's assailant. One day there was brought to the medical missionary at Bannu a man whose eyes had been destroyed by his enemies. When told that he would never see again, he said piteously, "Oh, Sahib, if you can give me some sight long enough to go and shoot my enemy, then I shall be satisfied to be blind all the rest of my life."

These Afghans were professedly religious, but love and mercy were not elements in their piety. A curious story is told of a certain desperado and freebooter who strictly observed all the ordinances of Mohammedanism. He showed Dr. Pennell a prayer that he had composed,—a prayer in which he begged that his bullet might never miss its mark. Before taking aim at a person he would repeat that petition, "In the name of God, the merciful and the compassionate." He said the prayer was always efficacious.

While Dr. Pennell was frequently thrown in the company of Hindus, his chief work was with the Afghans, who are nearly always Mohammedans; and those in the vicinity of Bannu were ever on the alert to oppose Christianity. This opposition ranged all the way from mere caviling to violent persecution, and even to murder, as a sure way in which to secure entrance to Paradise. In other regions,

the Mohammedans were more tolerant, the mullahs, or priests, reading frequently in public from the Bible as well as from the Koran, and speaking in admiration of Christ. But in Bannu a mullah did not dare to be seen with a Bible, and the mere mention of such doctrines as the sinlessness of Christ, the Crucifixion, or the Fatherhood of God was likely to create an uproar. The more fanatical mullahs taught their pupils to take the oath called *ghaza*. This oath is to kill some non-Mohammedan, preferably a European, although any "infidel" or "blasphemer" is lawful prey. The *ghazi* is taught that, should he lose his own life in attempting to assassinate a "dog and a heretic," he goes at once to Paradise. When intoxicated with his fanaticism, neither bullet nor bayonet has terror for the *ghazi*, for he walks a sure road to salvation. Among such people, Dr. Pennell, in 1893, took up his abode.

Bannu commands one of the four mountain passes used as trade routes by the merchant caravans from Afghanistan and Central Asia into British India. The tribes across the border are robbers, and they frequently invade British territory to pillage Bannu and other rich valleys. Naturally, Bannu became a sanctuary for bandits and outlaws. In 1847, a young English officer visited the district, and recognizing the strategic

importance of a region commanding one of the trade routes, he induced the Pathans thereabouts to assist in erecting the Fort of Edwardesabad, now called Bannu. A few years later a British official suggested the establishment of a Christian mission there, saying, "The Gospel of Peace will bear its own fruit and justify its name."

Dr. Pennell acquired the language of the region with remarkable rapidity, and as soon as possible he was preaching to the people. The text of his first sermon in Bannu was Matthew x, 16-22: "Behold, I send you forth as sheep in the midst of wolves: be ye therefore wise as serpents, and harmless as doves." He had come to establish medical work at Bannu, which would have been a sufficient task, but soon he was carrying the entire responsibility of the evangelistic and educational work.

When he had been in India a year, and at Bannu only a month, he had two hundred and twenty patients in a day, some of them coming seventy miles to consult him. Perhaps the desire to avail themselves of his medical skill was largely responsible for the friendly attitude of even the mullahs in that vicinity. In time, his reputation for a desire to serve, and a readiness to prove himself a brother to all classes, gave him the respect of priests and tribesmen, not to mention British officials in India. Whatever may have been their opinion of his doc-

trines, "it was no longer an article of creed to avoid the 'Bannu Padre Sahib,' and even the most bigoted mullahs were glad to avail themselves of his kindly help."

A residence of two weeks at Bannu convinced the medical missionary that, in a land of such unsanitary conditions, a hospital was a necessity for the treatment of cases requiring careful nursing; and, with their own private funds, he and his mother erected several wards. At this hospital, he attended as many as three hundred patients in a single day, upon some of whom he operated.

The medical and surgical work of the Pathan "fakirs" was of the crudest. There were two stock treatments. One was to strip the patient to the skin and wrap him in the warm hide of a sheep or goat, with the raw surface next him, covering him with several quilts. When successful, the result was a profuse perspiration; and sometimes, after two or three days in such unsavory wrappings, the patient was found to be free from fever. Another method of treatment was to roll a bit of cloth into a hard disc about the size of a silver quarter of a dollar, soak it in oil, and set it afire on the afflicted part. For neuralgia, the temples were chosen for this absurd treatment; for headache, the scalp; for rheumatism, the shoulders. On one patient Dr. Pennell counted as many as fifty scars.

The "Bannu Padre Sahib," as they called Dr. Pennell, was not content to treat only those who could come to him. In emergencies, he would travel great distances, knowing that he might, at any moment, meet some fanatical *ghazi* who desired a sure road to Paradise through the murder of an "infidel." Or, he would journey for long hours under a tropical sun, swim swollen streams, sleep in any mud hut available, and subsist on such food as could be obtained in the Pathan villages. Only one of many such instances can be related here.

At Lakki there was an epidemic of sunstroke. Dr. Pennell left Bannu at eight o'clock in the evening. He was soaked to the skin in a heavy rain, but he managed to borrow a horse and hurried on through the storm. The Gambela River was in flood, and he was about to swim it, when frantic gestures of persons on the other side dissuaded him. An hour later, he and one of his boys attempted to cross. In midstream, the cartilage of Dr. Pennell's knee slipped, and he was unable to use the left leg. Powerless to help himself, he was rapidly being carried down-stream. It was instinctive with him to pray; and on this occasion, as he afterwards related, he asked that the knee might right itself. A few moments later it went back into place with a jerk, as he neared the opposite bank. Since all his clothing had been left

on the other side of the river, he was compelled to avail himself of such coverings as were offered him. He walked through the city, wrapped in a sheet until he could secure clothing. On the way back home, he and his boys foraged for food. A few days later he was off again, with a party of his schoolboys and teachers,—Hindus, Mohammedans, and Christians,—eating together and sharing even their drinking vessels. This was a noteworthy incident, although but one of many, showing his real sense of comradeship with those to whom he had come as a messenger of Christ to heal and to hearten.

Dr. Pennell made many overland journeys, teaching and healing as he found opportunity. The hardships of such journeys would have deterred a soul less heroic than the "Bannu Padre Sahib." Besides quicksands, swollen rivers, tropical sun, and the unsanitary condition of the villages in which they ate and slept, there was usually the opposition of the mullahs whenever he attempted to preach. Mohammedans would interrupt him in his public addresses, and sometimes stones would be hurled at him. The mullahs would try to drive away the people, and if they insisted on securing medical treatment, they were told all manner of monstrous stories. On one occasion it was said that all sorts of vile stuff, such as wine and swine's blood, were

mixed with the doctor's medicines, which would make them Christians whether they wished to be or not; and that it was better to remain blind or ill than to have their faith polluted. When rejected in one village, the doctor and his companions would move on to another, where possibly they might be hospitably received until the mullahs could create further disturbance. Nevertheless, many sick persons came for treatment. His records show that, while traveling about, some days he would treat nearly two hundred patients, including perhaps a score of operations.

To a very remarkable degree, Theodore Pennell identified himself with all classes of people. He could not tolerate the thought of living apart from those whom he would help, or of ministering to them at arm's length. He desired to be brother and comrade to the most lowly. He ate the same food as the people among whom he dwelt, and this served to endear him to them. And he not only ate of their food, he has been known to relieve a coolie of a heavy burden, while on a long journey. This was a matter of astonishment to the coolie, but it proved Dr. Pennell's wish to, literally, share the burdens of those among whom he lived. This, perhaps, was the conspicuous mark of his missionary career, and a rare gift it was. Few persons have been able to find their way so surely into the

hearts of people of a different race; but Dr. Pennell made himself one of them, going into their homes, enjoying their simple hospitality, partaking of their simple meals, bringing them happiness, and sharing their joys and sorrows. On his journeys, he made it a rule to live on exactly the same food as the people around him; indeed, he became a vegetarian in order to enjoy the privilege of eating with the Hindus.

Despite the treachery of many of the people, he moved among them without fear, and his fearlessness won their admiration. If he heard that a certain mullah had preached of his murder as a sure road to Paradise for the *ghazi* committing the deed, he started immediately, unaccompanied and unarmed, for the home of that mullah. This showed an independence and intrepidity that won deep respect.

His free life among them sometimes appealed to the Pathan sense of honor. Coming late at night to a village where numerous outlaws resided, he placed himself under the protection of a chief. The chief took the precaution of placing him in a bed surrounded by six armed guards, where he soon fell asleep.. When some of the more fanatical guards wished to kill him, others said: "See, he has trusted himself entirely to our protection, and because he trusts us he is sleeping so soundly;

therefore, no harm must be done to him in our village."

Dr. Pennell believed that European dress made the people more conscious that a foreigner was in their midst and that the matter of dress widened the gulf between the Pathan and the missionary. Therefore, he went over the country dressed as a Waziri, a Peshawari Khán, or a mullah, according to the mission on which he was going, or the district which he was touring. He grew a beard, too, to conform to custom, so that, in native dress, he could hardly be identified as a foreigner. When he went to Lahore, to be present at the consecration of Bishop Lefroy, the vergers in the cathedral denied him admission to the section reserved for Englishmen. He was permitted to sit in the section set apart for Indian Christians. He was glad of an opportunity to share any of the indignities so thoughtlessly put upon the people of India, even by those who profess that "God has made of one blood all nations of men!" Indeed, a secondary purpose with him in adopting native dress was to ascertain what indignities were sometimes thrust upon the Pathans by officials and others. His appearance was so completely changed that he was once denied admittance to a third-class railway carriage labeled "For Europeans," by an official who refused to believe that he was an Englishman.

He cheerfully found a place among the Indians and sat up all night. When attending a conference at Mussoorie, he was taken for an Afghan and was refused admittance to the institution and reading-room. This, too, he accepted without protest. Once on the train, when he was addressed as a Pathan, and he asked how he had been recognized, the fellow-traveler replied, "Can a Pathan *ever* be disguised?"

The adoption of the native dress was merely an indication of his deep desire to make his life blend in every possible way with that of the common people. His close resemblance to a Pathan gave him an excellent opportunity to note the difference between the attitude of some foreigners toward other white men and their treatment of Indians. Usually he was accompanied by one or more Pathan Christians. In describing one of his journeys, he wrote:

"How our hearts opened towards those true friends who received both me and my companion alike, and did not start by the suggestion, 'I suppose your friend would like to be taken to the house of the catechist.' Why, forsooth? Many a time we were both the guests of the humblest of our Indian friends, and perfectly happy in a sense of equality with them. Others, too, of stations high above our own, received us both with an unreserved hospital-

ity, in which nothing was allowed to show that any difference was made between English and Indian, and we honored and loved them for it. Why, then, should others be at pains to show that they had one treatment for the Indian, or perhaps conceal that feeling so poorly that we were never able to feel at ease with them? Which, I ask, was more likely to draw the Indian out and make him feel there was a stronger tie which would overcome the pride of race?"

In his own heart, he was no respecter of persons or of races, and it grieved him deeply whenever he found a missionary or a non-missionary deliberately asking an Indian to take a subordinate place or position.

Dr. Pennell was ever anxious to learn of truth or beauty in any religion. He believed that the missionary could learn something from those whom he would teach. "We do not gain anything," he wrote, "from a missionary point of view, and we dishonor God, when we speak of everything in Islam or Hinduism as evil. The Mussulman has given a witness to the Unity of God and the folly of idolatry, which has been unsurpassed in the religious history of the world, and he has qualities of devotion and self-abnegation which the Christian Church may well desire to enlist in her service rather than to ignore or decry . . . Religion has

been to the Hindus a pervading force which has colored the most commonplace acts of daily life. . . . India, indeed, wants Christ, but the future Christianity of India will not be that Occidental form which we have been accustomed to, but something that will have incorporated all the best God-given qualities and capacities and thoughts of the Mohammedans and Hindus." Dr. Pennell was indeed an apostle of Him who came not to destroy but to fulfil.

Some further quotations from his own writings are of interest here. "Are we desirous of planting in India a Christian Church on the lines which we see developed in England or America? If so, I sincerely hope that we shall never succeed. Are we desirous of binding on Eastern converts the same burden of dogmas which has disrupted and still distresses the Western Church? Again, I sincerely hope not. Are we desirous of giving India the life and teaching of our Lord Jesus Christ, and of living Him before the people? . . . India's sons and sages may not interpret everything as we have done, but may do so in their own mystical and transcendental way." He was greatly pleased when the first convert in his work, Jahan Khán, went as the first Afghan missionary and settled at Bahrein on the Persian Gulf. It was one of his aims to make the Afghan churches strongly missionary. He had dis-

covered a secret of the growth of Mohammedanism. Mohammedan traders go far and wide, and every trader is a missionary. He had the joy of seeing several Afghans go to Arabia and Africa as missionaries.

Education was soon recognized by Dr. Pennell as a missionary agency of extraordinary value, and he gave much of his strength to the school for boys at Bannu. He went to India with a prejudice against educational work, but he became convinced "that the hope of India is in her mission colleges and schools." While the tone and teachings of the Bannu school were strongly Christian, places were set apart for Mohammedans and Hindu students who desired to perform their devotions, "because," said Dr. Pennell, "it is a terrible thing to take away a boy's faith, even though it be a faith in a mistaken creed; and I think the man who has argued or bantered a young fellow out of his faith without bringing him to a higher faith, has incurred a grave responsibility." Like other great missionaries, Dr. Pennell's work was constructive rather than destructive. Many of the pupils in the Bannu school were boys from wild tribes or from homes where the blood-feud was strong. Yet a society was formed whose members were pledged to render assistance to the needy, sick, or maimed. Their enthusiasm showed itself in kindness to cripples, sitting up with

sick men, bringing food to the destitute, and other equally practical forms of service. Boys who had been taught to consider revenge a sacred duty participated in the "Good Samaritan holidays."

Dr. Pennell's experience in athletics in England fitted him to lead the boys at Bannu in their sports and in the conduct of tournaments. The students soon learned football and cricket. They developed such skill that he took a crack team from Bannu on a long tour which included games with rival teams in the principal educational centers of India. This tour was of great benefit to the Pathan lads. The boys from the school never forgot their principal, and in after years he was constantly meeting appreciative alumni of Bannu who wished to do him honor. He gave a great part of his time to the boys, realizing that, in the days to come, they would be leaders among their own people; and perhaps nothing he did was of greater ultimate value than his personal efforts for the uplift and education of these young men.

Possibly it was his mother's influence on his own life that led Dr. Pennell to appreciate the importance of work for the Afghan women. These women suffer greatly because of restrictions placed on them by the false ideas of the East regarding woman's position. He saw clearly that the elevation of woman is essential to the regeneration of a nation,

and he was making plans to establish a hospital for them, when this, and all other plans for earthly service, were ended by his death.

In March, 1901, only twenty-six converts were reported at Bannu. In 1910 there were about one hundred. Bannu was not a place for the rapid growth of a church. The persecutions by the Mohammedans terrorized timid Christians. It was difficult to induce Indians from other parts of their country to come there as assistants in the school or hospital. Fortunately, Dr. Pennell did not gauge success by statistics. He felt it was wrong to measure results entirely by the number of converts, omitting the important element of his work, which was the "gradual permeation of the country with the teachings and example of Christ." He questioned the wisdom of pressing a new convert quickly into church membership, thereby inviting persecution before being sufficiently grounded in the faith to withstand persecution, and cutting him off from using his personal influence with a wide circle. If, instead of identifying himself with a foreign community, the convert were exhorted to go home to his friends and tell them what great things the Lord had done for him in Christ Jesus, more real good would be accomplished. "If they do not feel they can consistently join any of our Western churches, and if they form a Church of India, are we then to be

disappointed and think we have failed of our mission? A thousand times, no! Let us rather praise God that, instead of a number of hothouse plants, requiring careful watering and tending lest they sicken and wither, we have a harvest of indigenous growth, nurtured on the native soil of India, and ripening to a fruitful maturity under its own sun, and fed by the natural showers of heaven, without the aid of the missionaries of a foreign clime."

When cholera raged, Dr. Pennell and his mother did all they could to prevent the spread of the plague and to help the victims. The same was true in their fight against tuberculosis. In view of his labors, it was not surprising that in 1903 the Government of India decorated him with the Kaisar-i-Hind Silver Medal, which is bestowed in recognition of public service to the country; and in 1911 with the Kaisar-i-Hind Gold Medal. The Government recognized medical missions as a pacifying and civilizing force. When Dr. Pennell once pointed out to an official the need for a Government dispensary at a certain point, the man replied, "There is no need there; the people are quiet and law-abiding. Now A——, that is a disturbed area; there we ought to have medical work."

In the East the religious mendicants, practising the greatest austerities and self-denials, as they journey in their ragged raiment, usually afoot and al-

ways dependent upon the charity of the public, make a strong appeal as men of piety, and contributions to either the fakir [Mohammedan] or the sadhu [Hindu] is regarded as commendable. Dr. Pennell desired to know more about these men, who appart of the Ganges where the waters are supposed peared to be the embodiment of the religious ideals of the East. There seemed such a gulf between him, in his comfortable home, and the poor people around him. The best way to learn more about them seemed to be to adopt their dress and customs, and to travel with them for a time. So, taking a young Afghan who wished to go with him, and using bicycles to save time, he began a remarkable tour of several months' duration, clad in a turban, ochre-colored robe, and sandals, and without purse or scrip—a Christian sadhu. They were seldom in actual want, for Hindus, Mohammedans, and Christians gave them food and shelter.

In the great army of mendicants, which he had joined temporarily, the Christian sadhu found many charlatans and immoral caricatures of their own ideals. He found, also, many earnest seekers after truth. His wanderings took him to that particular part of the Ganges where the waters are supposed to possess special sanctity, and where hordes of pious Hindus bring the calcined bones and ashes of dead relatives to cast upon the sacred stream. At Rishikesh, he was given a place to spread his

blankets on the stone floor of a temple dedicated to Vishnu and Lakshmi, where sleep was disturbed by the beating of tom-toms and the clashing of cymbals, to awaken the gods for their evening meal. He had made his own supper on bread and pulse and had given the fragments to the temple cow.

At Rishikesh the self-made mendicants wandered around the wards where dwell the imbeciles who sought "to obtain fusion with the Eternal Spirit by cultivating an ecstatic vacuity of mind." When streams were to be crossed, the two travelers usually were compelled to sit on the river-bank until some one offered to pay ferry-fare for them. They observed fully the rules of the real sadhus, but their experiences did not influence Dr. Pennell to adopt or follow a more ascetic life. Indeed, he completed his tour with an increased appreciation of the practical, and in response to the inquiry of his heart, his memory gave this answer:

"Honest toil is holy service; faithful work is praise and prayer,
They who tread the path of labor, follow where My feet have trod.
They that work without complaining, do the holy will of God.
Where the many toil together, there am I among my own.
Where the tired workman sleepeth, there am I with him alone."

Dr. Pennell was reluctant to take vacations, but no white man could endure the hardships in India which he voluntarily undertook without paying the penalty; and by the spring of 1908, fifteen years and four months after he and his mother arrived in India, he felt compelled to make a short visit to England. Soon after reaching England, he heard that his colleagues at Bannu, Dr. and Mrs. Barton, had cholera. Mrs. Barton died quickly, and her husband passed away six months later. Then came the sorrowful tidings of the death of his own mother, who had remained in India. The news brought great sorrow to the son whose love for his mother had been peculiarly tender.

It appears that he spent only about four months in England. First, he visited relatives and friends, and spent some days at his old hospital. Next, he looked up the men who had been members of the Working Lads' Club. Then came deputation work, with more than a hundred addresses, and he spent some time in visiting hospitals, adding to his medical and surgical knowledge, and investigating new medical methods.

During his furlough, in June, 1908, his engagement to Miss Alice M. Sorabji was announced. At that time she was living in Srinagar, Kashmir. Dr. Pennell had always been a devoted son, but since his college days he had never had the companion-

ship of one of his own tastes and generation. Miss Sorabji belonged to an Indian Christian family. She was a graduated physician and belonged to a notable family. Dr. Pennell spent a week with his fiancée's mother, who at once gave him a son's place in her heart. She was a saintly woman and she appealed to all that was reverent and filial in his nature. The marriage took place in the Cathedral at Allahabad on October 17, 1908. The homeward journey for the couple was in the nature of a triumphal march; for, at many points along the route to Bannu, Dr. Pennell's former schoolboys and others welcomed him back to India and rejoiced at his marriage. More than two thousand persons joined in the procession that escorted them into the city of Bannu.

The first few days at home were occupied with receiving callers. At the first opportunity to visit Karak, the entire village of five hundred persons came out to meet him, where in early days he had been denied even a drink of water, and where he and his men had been stoned.

One of the first things to claim his attention upon returning from furlough was a visit to Thal, the frontier outpost, where plans were made for a hospital. Large numbers came to Dr. Pennell for treatment. The women were especially glad for the help of Mrs. Pennell. It appeared that the dream for the expansion of the work was about to be realized.

Wherever Dr. and Mrs. Pennell traveled, the people crowded about them for treatment.

The years from 1908 to 1910 were spent much as the earlier days had been, except for developing and enlarging the mission work at Bannu and extending it into unoccupied territory.

In 1910, increasing weakness on the part of Dr. Pennell required a visit to England for recuperation. Fortunately, a colleague, Dr. Barnett, had come from England to help in the medical work, and he could keep the hospital open. The publication of a Christian newspaper, conducted by Dr. Pennell for some years, was discontinued. Upon Dr. and Mrs. Pennell's return from England, the pressure of work was severe. The " Bannu Padre Sahib " was giving himself in the same unselfish way that he had for years past. " Never before had there been so much work in Bannu." The year 1911 told the same story, but time was taken for a visit to the great Durbar at Delhi, where he was greeted enthusiastically by friends and former pupils, many of whom he would see no more.

A new hospital for women had been sanctioned by the Church Missionary Society, and ground for the building was broken on March 6, 1912. The three doctors rejoiced as they made plans for a new building for the Mission hospital, which had long since outgrown the simple houses erected nearly twenty

years before by Dr. Pennell and his mother. A new hospital for men was contemplated, also. But these plans were not to be carried out by Dr. Pennell, for on March 15, Dr. Barnett was taken ill with a violent case of septic poisoning. On March 17, Dr. Pennell operated on his colleague, and himself took the infection. On the afternoon of March 20, Dr. Barnett died, leaving a young wife. That evening it was seen that the end was near for Dr. Pennell also.

Death had no terrors for that good man. His deep regret was that his work seemed to him so unfinished. Jahan Khán, his first convert, and others joined him in prayer by his bed, seeking divine help, but at six o'clock on the morning of March 23, 1912, he passed into rest. When the crowds surrounding the house knew that the beloved physician had left them, their grief was intense. They wished to see again the form of him who had been their friend and brother.

"He lay in his Pathan dress, in all the serenity of death, while they filed silently by—Hindus, Mohammedans, rugged warriors from over the border, women and children, schoolboys, beggars, patients; the lame, the halt, and the blind; old and young, foe and friend; all united by the common sorrow that bowed all heads alike."

The wild spirits of the Afghan border were

quieted by the sorrow that was over their land. A great multitude assembled at his open grave, many pressing forward to touch the doctor Sahib's coffin. They said of him, and perhaps they say yet, "He is not dead. Our Doctor Sahib could not die. He lives!"

II

CHRISTINE IVERSON BENNETT

the head of the gulf, the plan being to make the east coast of Arabia, nine hundred miles from Muscat to Busrah, the base line from which to move westward in the occupation of the country.

In a short time Mr. Zwemer joined Mr. Cantine at Busrah, where they tried to sell Bibles to the Moslems. For this offense Mr. Cantine had been imprisoned, and later Turkish soldiers were posted at his house to watch his movements. For a time it seemed as if little missionary work of any sort could be done at Busrah, among the fanatical Moslems. Later, however, Dr. and Mrs. H. R. L. Worrall, both of whom were physicians, began doing medical work, and this helped to break down the opposition to the mission. After a time it was possible for the missionaries to open a Bible shop, on condition that they would not attempt to sell books or preach in public places. Despite their intense hatred of Christians, and their belief that the murder of Christians would admit a Mohammedan into heaven, the Moslems in Busrah did not doubt the medical missionary would go to heaven. His good works would take him there although he was an "infidel." It was soon apparent that, in visiting cities or villages the first time, it was important that the missionaries should have a medical member of the party, for the doctor was usually the one who succeeded in winning friendly interest.

In 1893, or about the time when medical missionary work was being opened at Busrah, a girl twelve years of age left Denmark with her mother and father and brothers and sisters, in company with other Scandinavians seeking homes in America. This girl, one among the hundreds of thousands of immigrants to the United States that year, was Christine Iverson, who, a few years later, after heroic and successful efforts to secure an education, was to sail for Arabia as a medical missionary, and to settle eventually at Busrah.

In her life on the western plains, in her struggle for an education, and in her missionary career, she was to fulfil the best traditions of her Viking ancestors. This child of the Northland was to find in the United States a school of preparation for her work on the banks of the Tigris.

Mr. and Mrs. Iverson, whom their daughter Christine characterized as "humble, God-fearing parents," found a home for themselves and their children on the wide plains of South Dakota, not far from a Sioux Indian reservation in the southwestern section of the state. The presence of the Indians frequently frightened the children, including Christine, who was truly a big sister in her oversight of all the others. In those days there was neither church nor school which they could attend. In Denmark the family had been connected

with the Lutheran church, and the children attended a good day-school.

The year after the family came to the United States, Christine went to the little town of Chamberlain, South Dakota, to school, where there was a Congregational church, which accounts for her subsequent denominational connection. Concerning this period of her life she afterwards wrote:

"While there I read a book, 'The Post of Honor', a tale of missionary life in Madagascar. It made a great impression on me, and I became fired with the ambition to become a missionary. Of the kindness and love shown me by Christian people during those first years in a new land, I cannot speak too highly. God seemed very good, and the desire to give my life in his service grew. Two years later we moved to a small town near Yankton, South Dakota, where I went to school. I joined the church at that place and had my first experience in Christian Endeavor work."

There is a large measure of inspiration in the story of this young woman's endeavor to make her dreams come true. Here was a Danish girl, in a new land, who read a book that changed the course of her life. Fifteen years later, when she had graduated with distinction from one of the best medical schools in America, in applying for appointment for service abroad, she said, "I do not

forget that I owe my whole education largely to the purpose, formed at so early an age, to become a missionary."

Christine Iverson entered the High School at Yankton, working in a private family for her living and making all of her own clothes. Indeed, after she was thirteen years of age, she probably never possessed a dress that she did not make with her own hands, and yet it is said that the gowns which she wore at college were well made and becoming.

When she had finished the academy course and one year at Yankton College, she taught school for two years to earn money, that she might begin the study of medicine at the University of Michigan. During her first and second vacations as a medical student, she worked as a nurse to pay her expenses at school. Afterwards she served on the staff of one or more members of the medical faculty at Ann Arbor, being especially proficient in pathology. Prominent teachers in the university declared that no brighter young woman had ever been graduated from the medical department. In recognition of her scholarship, she was elected to membership in the Phi Beta Kappa, whose key she wore as a missionary in Mesopotamia. For her work as assistant she was paid, besides receiving the benefit of a scholarship; but accumulated debts made it necessary for her to earn money for a time after her

graduation. She accepted the appointment of woman physician at the Michigan Asylum for the Insane, where her work was so successful that her services were desired permanently; but after two years, having canceled all her indebtedness, she applied for missionary appointment to the Arabian Mission, an independent society affiliated with the Board of Foreign Missions of the Reformed Dutch Church in America. She was accepted. While a student at Yankton she had met a young woman who was a missionary in Turkey, and she had heard Dr. Samuel M. Zwemer speak at a Student Volunteer Convention. Moreover, a group of Christian people in Denmark, her native land, were much interested in missionary effort in Arabia.

It was arranged that Dr. Christine Iverson should visit Denmark on her way to the East and should attempt to quicken still more the interest of friends there in the land for which she was sailing. Her visit to that country was a notable occasion for those who were praying for Arabia. Fifteen years before she had left Denmark, a mere child in a family seeking to better its fortunes in that section of the United States where the sturdy Scandinavians were settling in such large numbers. She had gone back to Denmark an accomplished woman. Her friends say that her appearance was striking, with golden hair and a glow in her cheeks such as

the daughters of the Norsemen inherit. They say, too, that she was winsome in manner, and she carried into the East what the people of our own country call "the spirit of the West." She was enthusiastically American, and she loved the West where her busy girlhood had been passed.

In those Eastern lands, where woman's estate is so deplorable, it is peculiarly important that Western women should go, as qualified physicians, to their suffering sisters. The homes of a land must be reached if the people are to be taught Christianity. Nothing is plainer in mission strategy. But in some lands the homes can be entered by women alone, so far as missionary effort is concerned. No work in non-Christian countries is fundamentally of greater importance than women's work for women. Fortunately, Dr. Iverson was able to gain quickly the confidence of all classes. She was able, after a time, to go into the homes of the well-to-do, closely veiled Turkish women, who were more advanced educationally than the poorer classes. In such homes she read the New Testament and occasionally had a Bible woman hold a brief service. She was equally at home with the peasant classes. Many afternoons were spent in villages, treating sick women and distributing Testaments. The intelligent, unveiled, independent Bedouin women from the tent-villages of the desert, where their husbands

owned herds of horses, camels, and sheep, were as friendly as the women of the city.

Dr. Iverson went first to Bahrein, expecting to do medical work there for women, where two devoted workers, Mrs. Worrall and Mrs. Thoms, had labored successfully. But "best laid plans" sometimes are changed, even among missionaries! While Dr. Iverson was studying the Arabic language, in which she became exceptionally proficient, and before she had begun her medical work, she became affianced to Dr. Arthur Bennett, then completing his first term of service in Arabia. She had known him during her student days at the University of Michigan. Upon Dr. Bennett's return from furlough, in September, 1911, they were married at Simla, in the hills of India, and proceeded soon thereafter to Busrah, where the commodious and modern Lansing Memorial Hospital had just been completed. Permission for the erection of this hospital had been granted by the Turkish Government only after Dr. Bennett had made the long journey to Constantinople and had remained there for several months, seeking the favor of being allowed to minister to the blind and sick in a corner of the Sultan's domain.

Busrah, at the head of the Persian Gulf, is a city of 60,000 or 70,000 people. Fully a million more live in the garden country outside the city, which

is on the Tigris River. This river receives the current of the Euphrates a few miles farther north. It is the port where the British Army, under the command of Sir Arthur Barrett, landed in November, 1914, for the campaign in Mesopotamia, expecting to move quickly up the Tigris to Kut and Bagdad. The difficulties encountered by the British, including a temporary defeat, are now well known. During the stirring days when the Turks occupied the city, and later when the British were pouring their soldiers through Busrah, both Dr. and Mrs. Bennett rendered heroic service.

The Lansing Memorial Hospital at Busrah, with accommodation for a hundred and fifty patients, was admirably adapted for the care of both men and women. Mrs. Bennett took charge of that part of the hospital reserved for women, while her husband gave his chief attention to the men; but as husband and wife, it was possible for them to give their combined attention, in many cases, to both men and women. Moslem women in the hospital would sometimes permit the husband of their own doctor to treat them in the presence of his wife, but often there was objection to the presence of any man. In turn, the wife assisted her husband in many delicate operations on the patients who crowded the men's wards. Usually an American nurse was in residence at the hospital, while two

Indian nurses, trained at Vellore, in India, gave their help almost exclusively to Mrs. Bennett. Two Arabian Christians compounded the drugs prescribed. Both doctors were wellnigh overwhelmed with patients. The work for women was so successful that frequently Mrs. Bennett gave more treatments in a day than her husband; while she devoted much time to bacteriological work on which she had specialized at the University of Michigan. The hospital became self-supporting as soon as it was opened, in 1911. It was the only one within a radius of three hundred miles.

While Mrs. Bennett's professional skill attracted many of the women, her chief power was in her singularly attractive personality. One of the missionaries at Busrah said, "Her sunny smile and bright, ready speech made her a delightful companion to all she met." Because of her wit and charm, she was in demand socially within and without the Mission circle. Yet she was an indefatigable worker, and was never satisfied with slipshod effort. Her success as a physician was due largely to her requirement that everything should be done thoroughly. This was a governing principle with her. In her study of the Arabic language she was so earnest that, when she finally acquired it, the patients sometimes said that they could detect no foreign accent. She liked the Arabs, and they in

turn liked her. She was a woman among women. She could mingle with the best Turkish and Arab women and could sympathize with the most lowly. No one was ever turned away, however tired Mrs. Bennett might be. The wife of a sheikh from far away, operated on in the hospital, called her "sister" and left a bracelet as an expression of her regard. Poor women would bring eggs, a basket of fruit, or a chicken.

As is true in most other Eastern lands, many persons in Arabia and Mesopotamia suffered from eye troubles. Mrs. Bennett found in this field alone large use for her surgical skill, and she would perform, unaided, several hundred eye operations in a year. Women sought advice from the beloved woman physician concerning delicate babies; others, suffering from tuberculosis, were told how to live so as to combat the disease most successfully. Patients with diseased bones, terrified at first at the suggestion of surgery, were won in time to confidence in the skill and tenderness of the woman doctor. As many as a hundred lepers would be treated by the two physicians in a year, huts being erected for their use near the hospital compound.

The Arabs were always fighting, and the hospital received a stream of men from the desert suffering from gun-shot wounds. It was not uncommon to have ten or fifteen such cases at the same time.

Twice, in epidemic form, the bubonic plague visited the region. In one such epidemic at Bahrein about three thousand persons died from it. Dr. and Mrs. Bennett sent to India, at such times, for a supply of vaccine, and vaccinated all who were willing to accept the protection it offered.

Mrs. Bennett usually gave her afternoons to visiting in their homes women who were suffering from fever, tuberculosis, or other troubles. Sometimes she went to homes in whose large rooms a profusion of rich rugs and gold-embroidered pillows were a part of the Oriental luxury. Into such places it often happened that only a woman visitor would be admitted. Sometimes the afternoons were given entirely to visits among peasants of the adjacent country or to the uninviting homes of the poor people of the city. Occasionally, both doctors would spend a few days with the Bedouins, the nomads of the desert country, living in their tents of sheep- or goat-skins, and traveling with their host as the Bedouins followed their herds to better grazing-lands or watering-places.

Mrs. Bennett delighted in visits to the desert country in springtime, when the great herds of sheep, camels, and horses grazed on the green expanse that became brown and desolate by midsummer. "It reminds me of the plains of Dakota," she would say. Then there was much in the cus-

toms of the sheikhs of the desert which helped her to interpret, with clearer understanding, the Bible stories that furnish the historical background of the life of Jesus. Were not Abraham, Isaac, and Jacob great sheikhs in their time? Frequently, at the close of the day, the missionaries would see half a dozen shepherds leading large flocks to the same watering-place, where the sheep, struggling to reach the pool or stream, were soon mixed in one vast herd. But at the sound of each shepherd's voice, his own sheep would separate themselves from the others and follow him to the proper fold. At such a sight there would come a new meaning to the words of the great Teacher:

"I am the good shepherd; and I know mine own and mine own know me. . . . And other sheep I have which are not of this fold: Them also I must bring, and they shall hear my voice; and they shall become one flock, one shepherd."

Many of the Bedouins were rich, but they did not care to leave the desert country for life in the cities. Wise men! One of them, unconsciously a poet, said to Dr. Arthur Bennett:

"You people are creatures of circumstance. You ask why I do not go to Bombay. I have been there. It is better here in the open, with the stars, and with my herds and wives and children, free to go as I please, than to live in the crowded city. I have seen

your hotels. But did you ever eat any better food than this juicy and sweet roast young lamb, stuffed with almonds, limes and rice? Besides, we have milk and butter and dates. In your cities I meet men who do not think of inviting me to eat with them. Here every one who comes is welcome to my tents, and no Arab asks a visitor to tell his business for three days. Here I see the stars come and go." And the missionary confessed to himself that he had not only learned something about hospitality, but he had learned more from the Bedouins about the heavenly bodies than he had found out from books on astronomy.

The medical missionaries found some noble characters among the Bedouins. There was Sheikh Mizal Pasha, who was so generous in his impulses that he was called the "Father of Fatness"! He always responded to a cry of distress, and he found delight in making great feasts for hundreds of poor people. On one occasion he provided seven immense platters, with five roast sheep and bushels of rice on each. His appearance was like some of the modern representations of Abraham. Once he sent for Dr. Arthur Bennett to treat him for a month. At the conclusion of the visit he gave the missionary $750. for the medical work at Busrah, besides presents of sugar and sheep. Often such men are thoroughly devout Mohammedans, and

hold to the doctrine of the saving efficacy of good works. Many in that region believe, too, in the equality of all men in the sight of Heaven. In the eyes of the desert Arab, all men are equal before God—servants and masters, peasants and princes, poor and rich. This conception of spiritual equality, as held by these desert men, finds impressive expression at the sunset hour as the sheikh, standing side by side with his servants or slaves, cries with them in stentorian tones:

God is great! God is great!
There is no God but Allah,
And Mohammed is his Prophet!

In the summer of 1914, both doctors had been called far up the Tigris, to Bagdad, to operate on the daughter of Nakib, the head of Mohammedanism in that city, a city which was soon to be defended sternly by the Turkish troops against the invading British forces. Nakib gave the two medical missionaries the use of his beautiful summer home on the banks of the Tigris, in the midst of orchards of oranges, apples, figs, grapes, and apricots. It was one of the finest places in Bagdad. Horses and servants were provided, and a carriage was sent every day to take the physicians to their patient. The operation proved to be a very simple one.

The morning in July when they left for Busrah, flags were flying at half-mast on the public buildings in Bagdad. The occasion was the assassination, in Servia, of the Crown Prince of Austria, and the telegraphic reports indicated that a European war was imminent. By the time the two doctors were settled again in their hospital at Busrah, the Great War had begun, but Turkey remained neutral until late autumn. In November, Turkey entered the conflict, the Mohammedan ecclesiastics declaring a holy war. The situation at once became serious for all Christians in Moslem lands, regardless of their nationality. All British subjects left Busrah immediately, but in a few days Sir Percy Cox, British Political Agent, and Sir Arthur Barrett, commander of the British military forces, were reported as coming up the Persian Gulf.

The Turks prepared for an attack. Immediately the medical missionaries offered their hospital for the care of the wounded Turkish soldiers, to be conducted under the auspices of the Red Crescent. In two or three days the wounded began to pour in from the front, and both doctors worked regularly until midnight. As yet, it was the only hospital in that region. The governor came down to witness the operations, and officers and soldiers showed genuine appreciation of what was being done for them.

The more serious cases were treated at the hospital, while those with less dangerous wounds were sent to the school buildings and churches of the several missions in Busrah. Usually there were a hundred badly wounded Turkish soldiers at the hospital, and night and day both doctors and nurses were working hard.

On November 18, 1914, the police ordered all patients at the hospital who could travel to prepare to leave the city, and that night the Turkish army evacuated Busrah. On November 19 and 20, when there was no government in the city, lawless forces gave themselves to looting. The Custom House was burned and vast quantities of stores were taken from the warehouses. Fortunately the hospital, with more than a hundred remaining Turks who were seriously wounded, was not molested. On November 21 the British came. On Saturday night the incessant firing in the streets by Bedouins and Arabs had stopped suddenly, at the boom of distant English cannon, and searchlights of the British navy began to brighten the sky. Sunday morning Dr. and Mrs. Bennett took a small boat and went down to the mouth of the river, where they offered Sir Arthur Barrett the services of the hospital, which was still filled with wounded Turks. The British Commander expressed his appreciation, and requested that the hospital continue to care for the

wounded Turkish soldiers, who were made prisoners of war. The Red Cross flag took the place of the Red Crescent.

Throughout the year 1915 the British, who were attempting to reach Bagdad, had hard fighting. The Turks were being trained by German officers and they were not so easily defeated as in other days. Meanwhile, the hospital at Busrah was held for the care of wounded Turks whom the British took as prisoners. As many as one hundred and forty-three severely wounded men were received in one day. The British sent several doctors and nurses to assist in the care of the large number of wounded.

Until January, 1916, only the wounded were received at the hospital, the sick being cared for elsewhere. But early that year typhoid and malaria became common, and the British asked the missionaries to take care of the sick, since they knew the language of the soldiers and therefore could minister to them more intelligently. Tents were erected in the hospital compound for seventy or eighty fever patients. Both the doctors and the nurses were already taxed to the limit of their endurance, as were the British assistants also, but they all accepted the added responsibilities as long as their strength held out.

The fever patients from the trenches who were

sent to the hospital died in numbers. They had been sent there supposedly ill with typhoid and malaria, but the medical missionaries suspected typhus, a vermin-bred disease, which had not appeared until then in Busrah. Soon Miss Holhauser, an American nurse at the Mission hospital, and two Indian nurses were taken ill with what was diagnosed as typhus. Suddenly Dr. Arthur Bennett, weakened by his long months of service for the wounded soldiers, was taken ill. The British medical staff hastened to him and quickly removed him to a private ward in their army hospital, for it was evident that the dread disease had seized the physician. Mrs. Bennett was compelled to take complete charge of the Mission hospital, with its multitude of sick and wounded, and to care for her little son Matthew, three years of age. But every evening she made the journey to the army hospital and spent the night with her husband, who had lost consciousness. The strain was more than her body could bear, after nearly one and a half years of incessant labor for the wounded Turkish soldiers, and she too fell ill with typhus fever.

The British officers, mindful of the service that had been rendered by these self-forgetting missionaries who were helping to win the war, were careful to see that they received the best attention which could be given in the army hospital. Early in April

Dr. Arthur Bennett regained consciousness. In his weakness he wondered day by day why his wife did not come to him. When he was strong enough to bear the shock, he was told that, on March 21, in a tent next to his own, his wife had fallen asleep and her body had been buried in the little foreign cemetery at Busrah.

Those were turbulent days when Busrah was swept by the tides of war, and it seemed an age since the quiet times, when the woman doctor went here, there, and everywhere on errands of mercy; but when it was known that their white sister had fallen asleep, many women of all classes voiced their affection and sympathy.

Those were the days that were darkest for the British in their campaign in Mesopotamia; but the most notable persons in charge of the expedition stopped their official work long enough to join the mission body and others in a funeral service. The service was in honor of the little Danish girl who dreamed of doing work for God and man; who, without ever faltering, struggled to prepare herself for service; who gave her life and love with beautiful generosity, and who fell at

"The Post of Honor."

III

FRED DOUGLAS SHEPARD

III

FRED DOUGLAS SHEPARD

ONE of the blackest pages in the history of the world is the story of the massacre, soon after the outbreak of the Great War, of hundreds of thousands of Armenians—men, women, and children—and the death from starvation, along the roadside, of hundreds of thousands more who were driven from their homes.

For thirty years Germany had courted Turkey, for the sake of securing the latter's assistance in the great war that was being planned with a view to German domination of the world. Did not Turkey control the Dardanelles? For through the Dardanelles munitions and other supplies must be sent into Russia by the Allies, except in the warmer months, when the waters within the Arctic circle were navigable. If Russia were to receive supplies at all, beyond the comparatively meager amount which could be transported over the Trans-Siberian railway, the supplies must pass through the Dardanelles. Was not the Sultan the head of Mohammedanism? And if he could be persuaded to de-

clare a "holy war," would not millions of Moslems rise up to smite the enemies of Islam? Would not an uprising in India and Egypt so terrify Great Britain, and so wreck British colonial policies, as to shatter the power of the English? Would not Britain quickly withdraw from participation in the war if she were threatened with such an uprising in her colonies?

Nothing seemed clearer in German strategy than the bold stroke which resulted, in November, 1914, in the proclamation by the Sheikh-ul-Islam, calling on Mohammedans everywhere to slay Christians. The proclamation had been worded so as to exclude Germans and Austrians, and it was distributed stealthily in all Mohammedan lands. But even the plain people asked why they were commanded to slay Christians while they were claiming Christian nations, Germany and Austria, as friends, and were fighting for them. In consequence, Germany failed in her attempt to release 300,000,000 Mohammedans against the Allies.

Early in 1915, a certain stalwart American journeyed from Aintab to Constantinople, fully five hundred miles, to assure the Turkish Government of the loyalty of the Armenians in the province of Aleppo, where atrocities had been committed, and to intercede in their behalf. This American was Dr. Fred Douglas Shepard, who for thirty-two years had done much to relieve suffering among

the Armenians and to exemplify a gospel of love. Many persons had come almost to worship him. He knew the hearts of the people of Aleppo Province and was able to assure the Turkish Government of their loyalty in the prosecution of the war, but his efforts were of no avail. The atrocities continued. Meanwhile, Dr. Shepard remained near Constantinople, taking charge of the Red Cross Division of the hospital at Tash Kishla, where streams of wounded Turkish soldiers from Gallipoli were treated.

What had been the upbringing and the training of a man who could take so highminded a view of duty? His early life seems like that of many other sturdy young Americans.

Fred Douglas Shepard was born in the little town of Ellenburgh, New York, close to the Adirondacks. While still very young, his family moved to Malone, New York, some twenty-five miles westward; and here his youth was spent. He always loved the woods and the mountains, and while still a boy, he made close friends of two famous hunters with whom he delighted to go into the wilds. When he was a young man, he enjoyed camping alone in the mountains for two or three weeks at a time. This love for the out-of-doors remained with him throughout his life, and in Turkey, when the sick people entreated help until hand

and head were unsteady, he found relief by going for a day to the streams and hills, with his rod and gun, which he had learned to use so well in boyhood.

His father died when the lad was thirteen years of age, and a large part of the responsibility for the family fell on his young shoulders, since his mother was an invalid and his brother was in poor health. The two sisters could do but little to help. His father, a lumberman, had been defrauded by a partner in the business of a saw-mill. The consequent poverty of the family made it necessary for Fred to work at his uncle's grist-mill, but he managed to secure considerable schooling, and in time he entered Cornell University where he "worked his way" for two years. Part of his expenses he earned by harvesting apples. When he decided to study medicine, he went to the University of Michigan, dependent still upon his own effort. During his first summer there, he worked as a carpenter on a new building. Another summer he worked on a farm near Ann Arbor. The old farmer looked down on the young man, who was only five feet and four inches in stature, and asked, "What can *you* do?" Young Shepard replied, "If in two weeks any man working for you can do more than I, do not pay me anything." Though small, he was physically powerful, and in later years he often surprised the

people of Turkey with his strength. He could pick up almost any patient in his hospital and carry him from the operating-table to a ward, a useful feat where assistants were not numerous.

Upon graduation from the medical school of the University of Michigan, he gave a year to the special study of the eye, under Dr. Herman Knapp, to whose memory the Knapp Memorial Hospital in New York City is dedicated. Although he had joined the Baptist church in Malone, when he was twenty years of age, he was appointed to foreign mission service by the American Board of Commissioners for Foreign Missions. Before sailing for Turkey, he was married to Miss Fanny Perkins Andrews, whose parents had been missionaries in the Sandwich Islands. The two had met in the medical school at Ann Arbor. The marriage proved to be an exceedingly happy one in every respect, for both were physicians and both were real missionaries.

Dr. and Mrs. Shepard sailed for Turkey in 1882, and landed at Alexandretta. About one hundred miles northeast was the city of Aintab, where the Azariah Smith Memorial Hospital was already established, and there the new appointees were to assist in the medical department of Central Turkey College. But they were destined to give the greater part of their time to direct medical work in the hos-

pital, which was the only institution of its kind within an area twice as large as New England.

The two doctors found multitudes of sick persons awaiting their help, suffering from all manner of diseases. Eye troubles were very common, and the special training under Dr. Knapp proved of great value to Dr. Shepard, immediately upon reaching the field of his labors. He reserved the hospital almost exclusively for surgical cases, but he treated whatever came along. At first the Mohammedans said Dr. Shepard had come to Turkey because he could earn more money there than in America; that he must be very rich, too, since he owned a fine horse and lived in a large house. A Mohammedan priest, however, argued that, had the doctor remained in America, he would have earned ten times the amount of his salary as a missionary. He explained the doctor's hard work in Turkey on the theory that he was seeking to save his own soul; that he had made a vow, or had committed some sin for which he sought to make atonement by leaving his native land.

A patient who had just been treated by the doctor then spoke up and told the priest that he and the others were mistaken; that another inmate of the hospital who had been there two months had explained it all in these words: "These Americans and their Armenian helpers have a strange way of

talking about Hazreti Eesa (Jesus of Nazareth). He seems to be their master, and they act as if he cared for us." The patient added that while his wife was at the hospital, he went there every day and found out something for himself about Hazreti Eesa. He had been given a copy of a Gospel which explained Dr. Shepard's motive. In conclusion he gave his audience this advice: "If you want to know the real reason why Dr. Shepard and these other Americans come to Turkey, you must read that book."

Every few years the cholera appeared in Aintab. Dr. Shepard himself had it once. The medical missionaries gave public lectures, instructing the people to use only boiled water and to eat no uncooked food. The mission press cooperated, and printed advice was distributed freely.

The results were very striking. The Christians who heeded the advice suffered little in comparison with the Mohammedans. A Turk asked Dr. Shepard: "Does God spread his wing over the Christians, so that they do not die from cholera like the Turks?" The doctor explained that the Turks in general were too stubborn to be willing to be taught the simple rules which many of the Christians had observed.

Dr. Shepard was strong in mind and heart as well as in body, and he was absolutely fearless,

whether dealing with spirited steeds or with Kurdish highwaymen. At the same time, he was tenderly sympathetic; he made the people feel that he cared for them in their trouble; that his first interest was *in them* rather than in any program of his Mission or triumph of his denomination. He made them feel that, whatever their station, they could get whatever he had to give. He identified himself with the people, uniting with an Armenian Evangelical church, in which he served (he did not attempt to direct), in an unpretentious way, as a deacon.

Although time and strength were given largely to direct hospital service, some excellent results were secured in the medical school, until that department of the college was closed on account of lack of funds. While numerous young men were trained in the four classes that were graduated, several of his students have been notably successful. One of them, Dr. Habib Nazarian, was, for more than thirty years, the leading Armenian physician in Aintab. It has been well said, "His influence was the most direct, wholesome, personal force in the life of the community for a generation." The other is Dr. A. A. Altounyan, the most skilful surgeon in Aleppo, the capital of North Syria, a city of 200,000 people. Dr. Altounyan has made frequent visits to Europe for post-graduate study, and

he has built a hospital of his own which is far superior to the Mission institutions. This is as it should be. The native forces in every land should be expected to do a larger work than is possible for the foreign missionary, and he is wisest who trains native leaders to go far beyond their missionary instructors. Both of these native doctors are active Christians, influential citizens, and members of the Board of Managers of Central Turkey College.

Dr. Shepard toured the country, possibly more than any other missionary in Turkey, sometimes needing as many as three horses in a year. When in haste, he would go through the most desolate sections, in order to avoid towns where he would have been required to stop five or six hours "to clean up cases brought on the spur of the moment." Although the roads were infested with bandits, he rode day or night as occasion might require, and he seldom carried arms. He was fond of hunting, however, and it was well known that he could shoot straight and that he brought down bears, wild boars, and deer.

The only time Dr. Shepard ever suffered at the hands of highwaymen was when he engaged in relief work after the terrible massacres of 1908. Jemal Pasha, the governor of Adana Province, had appointed him chairman of a committee of three to have charge of the rebuilding of destroyed villages

in a mountain district. Usually he carried in his saddle-bags large sums with which to pay the laborers, but this time he had little money with him, and therefore he was attended by only one servant. As he was going down a steep, narrow road in the mountains, leading his horse, he heard his servant exclaim, "Don't come here. I'll shoot you." Turning, he saw two Kurds charging down hill on the servant and several others approaching. The servant was about to shoot one of the Kurds when the doctor threw them apart. The other Kurd knocked Dr. Shepard down with the butt of his gun. The missionary happened to be unarmed that day. The Kurds took their captives to the woods and held them there, while they attacked all others passing that way and robbed them. They could release none of their prisoners until the close of the day, lest other travelers be warned of their presence. Finally an Armenian peddler, who knew Dr. Shepard well, was added to the colony of captives. Turning upon the Kurds he said: "Now you *have* done it! You can rob any one else you please, and escape, but you can't rob Dr. Shepard and go unpunished." The Armenian's remarks had a very disquieting effect on Dr. Shepard, for he feared he now would be put out of the way immediately by the leader of the bandits, a ruffian named Abtino, who was known as the most desperate outlaw of

the region. He had twenty murders to his credit, and he added three more within the next two days. Once the Government sent a regiment after him but failed to find him. Why Abtino did not kill Dr. Shepard, whom he seemed not to recognize until heckled by the Armenian, cannot be surmised, unless he remembered that once, when he was wounded, he had been treated by Dr. Shepard at the hospital. Possibly a spark of gratitude flashed in his breast for a moment. At nightfall the doctor and his servant were given their horses and were permitted to go their way.

Dr. Shepard telegraphed the governor, who ordered an army officer to take as many men as he needed and capture Abtino. In seventeen days Abtino was taken, and after being identified by Dr. Shepard, he was hanged.

On another occasion he outwitted two Circassian robbers who were well mounted and whose steeds promised to overtake his own. Reaching a turn in the road, he took advantage of his disappearance, for a moment, from the view of his pursuers, and led his horse aside, behind a group of trees. A few moments later the Circassians dashed by in hot pursuit, whereupon Dr. Shepard retraced his steps and took another road to Aintab.

Mrs. Shepard was a botanist as well as a physician, and in Turkey she discovered several flowers

and plants that had never been described in any botanical work. Once when she saw, on a high ledge of rock, a certain flower which she wished to examine closely, her husband climbed up the face of the precipice as far as he could, and then, with his revolver, he shot down the plant which his hands could not reach. Mrs. Shepard was also deeply interested in the most practical forms of social service, despite the demands made on her time by her children, two daughters and one son, all of whom are now in missionary service. At the time of one of the famines, she encouraged the women of Aintab to do needlework, which was sold for them in America. Until then, there was little remunerative work for them, except reeling cotton for the hand looms, where their wages were small—from three to five cents a day. Thousands of women in Aintab alone have learned to do this needlework, and the industry has spread over the country. Native dealers took it up, and women now are able to command better wages for other kinds of work, since learning how to earn far more with their needles than they had ever been paid for such labor in other days.

Anything to enable the people to secure food in the terrible days of famine in Turkey was an unspeakable blessing. In 1888, Dr. Shepard wrote to America:

"We reached this place yesterday, after having spent three days traveling about the northern part of the great Adana plain. It was a sad sight, this great, fertile plain as deserted and desolate as Sahara. Village after village was completely deserted, or had a single family left in it to guard it. Very little had been sown or planted, and what little had been was dried up from the root. Arrived at Adana, we found the mission house besieged by crowds of hungry women with their starving infants at their breasts. I hope the good people at home will give from their plenty to feed these starving bodies. In the providence of God it will be instrumental in feeding many starving souls as well."

The work at the Azariah Smith Memorial Hospital at Aintab developed amazingly, with a staff of two American physicians, three Armenian doctors, a superintendent and head nurse, six other nurses, a chaplain, a cook, and numerous servants. The total number of out-patients in a year was 5,492, three fourths of whom had nothing whatever with which to pay for the care given them. The annual major operations averaged five hundred. An average of more than two hundred and fifty persons visited the hospital every day—Turks, Armenians, Greeks, Jews, Arabs and others. The chemist compounded 20,000 prescriptions in a year, and the physicians registered 54,208 visits to patients at the

hospital and outside during the same period. Added to this was the religious work (if there is a line of distinction) done by the chaplain, the missionaries, and the others.

In 1907, the twenty-fifth anniversary of the coming of Dr. and Mrs. Shepard to Aintab was appropriately celebrated. The exercises had been announced for October 19, but a telegraphic demand for medical help came from Aleppo, and the Doctor hastened to respond, remarking, "That patient's life is worth more than all this celebration." So the exercises were postponed a week, when the First Church in Aintab, which accommodates more than 3,000 persons, was crowded with an audience composed of representatives of all the nationalities and all the religions of the land, while many others stood outside, listening through the open windows. The speakers recognized the truly great service which had been rendered by Dr. and Mrs. Shepard, and all of them alluded to the gift which had been made to Turkey by one who might have earned a large fortune, had he used his skill for his own benefit. Mrs. Shepard's labors for the industrial improvement of the women of the province were also recalled. It was estimated that through her efforts the annual income of the women of Aintab alone had been increased more than $35,000.

In response to the numerous eulogies, Dr. Shep-

ard made a very simple address which revealed the real spirit of the man. He said in part:

"If one who did not know me had listened to what has been said about me during the last two hours, he would think that Dr. Shepard must be some great man; but you and I know that it is not so. A farmer's son, I grew up as an orphan. I finished school with great difficulty. I have not marked intellectual ability. Yet this great gathering on a busy week-day afternoon must have a reason. I know that this reason is not I myself. It is one greater than I am—God and his love. For one who knows how God loves men and how Jesus has saved us, not to tell others about his love is impossible. Because I have understood a little of that love, I try to let others know about it. This is the purpose of my life. I did not come to this country to make money or to win a reputation. I came to bear witness to this, that God is love. And if, by my work or life, I have been able to show this to you, I have had my reward, and for it I thank God."

In the autumn of 1914, Turkey's response to Germany's overtures resulted quickly in great wailing and lamentation among the Armenians. The suffering of the people was almost crushing in its effect on Dr. Shepard, who was ever a man of peace. With reference to the countless harrowing atrocities which followed he wrote:

"It looks as if there were a settled plan to destroy the Armenians, but in such a way as to avoid the hue and cry that would follow another massacre."

In the autumn of 1914, while at the seacoast on business, he wrote that he could hardly endure the thought of returning to Aintab and facing again the terrible conditions there, unless some way were found to give larger relief to the suffering creatures of that community.

In the early days of the massacre of the Armenians in 1914, Jemal Pasha, military governor of the region around Aintab, was able to prevent deportation from that section, but after a time he was transferred to another post. Dr. Shepard visited Jemal Pasha's successor, hoping to influence him in the direction of leniency towards the poor people. As he was not successful with the local governor, he next made the long journey to Constantinople to see what could be done at the capital of the Empire. As already related, he did his utmost to assure the Government of the loyalty of the Christian people of Aleppo Province, but a policy of extermination had been adopted, and his pleadings were in vain. He had a hard summer, ministering to the wounded Turkish soldiers in the hospital near Constantinople, and when autumn came, it seemed wise for him to return to Aintab, where his wife had remained.

After a few weeks at Aintab, weakened in body and mind by the suffering he had witnessed, and by his inability to do anything effective to save the Armenians from deportation, Dr. Shepard succumbed to an attack of typhus fever and passed away in December, 1915. With the community terrorized as it was, and with the population reduced by reason of the atrocities committed, there was not given to the people the opportunity to express, in a public way, their appreciation of the noble services of one of the noblest men who ever lived in Turkey.

When the life and work of such a man as Fred Douglas Shepard are reviewed in the light of the turmoil in Turkey for many decades, it is easy to accept the remark attributed to Viscount Bryce, formerly British Ambassador to the United States, that the only international influence which has ever helped Turkey, has been American teachers and American missionaries.

IV.

JAMES CURTIS HEPBURN

IT is difficult for a visitor to the Sunrise Kingdom to realize that not until the year 1853 did Japan open her doors to the outside world. For two and a half centuries the Japanese had lived the life of a hermit nation, the government strictly forbidding any of its people to visit other lands, and as strictly prohibiting foreigners from landing on the main islands of old Nippon. If a Japanese junk were driven by an adverse wind to some foreign coast, the sailors were not permitted ever to set foot again on their native shores.

The traditions are to the effect that, in the sixteenth century, the labors of the zealous Roman Catholic missionaries, Francis Xavier and his followers, resulted quickly in the conversion of a million Japanese. Political leaders became alarmed, for it was rumored, first, that the Pope had divided the unexplored lands between Spain and Portugal; and, second, that in the wake of the missionary followed soldiers to take possession of countries in

the name of their sovereign. Such rumors, unfortunately, were not entirely without foundation. Japanese political leaders made much of the rumors, whatever may have been the motives of the early Roman Catholic missionaries, and soon it was decreed that all foreigners should be banished from the country, except a few Dutch traders and others who might reside on a small island near Nagasaki. It was further decreed that the Christian religion should be abolished. The missionaries were expelled at once, and Japanese who would not renounce the foreign religion were threatened with death. Soon Christianity disappeared except from the hearts of a few simple people who lived in out-of-the-way places and passed on their faith from generation to generation.

One can only wonder if the history of Christianity in the Orient would not have been far different had all missionary effort there been so obviously disinterested as to relieve its representatives of suspicion of ecclesiastical or political motive. Perhaps some day we shall make our plans more nearly in accord with the spirit of Him who "came not to be ministered unto, but to minister, and give his life a ransom for many." Perhaps some day we shall be more ready to give all and ask nothing in return, save the joy of having given; to serve and ask nothing in return, save the joy of having served.

Perhaps some day we shall see that it is as true for agencies as for agents that he who saves his life shall lose it, while he who loses life in a joyous abandon finds it multiplied.

The doors of the Empire were opened in 1853, with greatest reluctance, and even then only because Commodore Matthew C. Perry, with several small ships of the American Navy, dropped anchor in Japanese waters and insisted, if he did not compel, that the portals be left slightly ajar. The gates were not swung open at first. After much persuasion, consent had been given for sailors of other nations, when in need of assistance, to take refuge in three Japanese harbors.

But in 1853 the door had really been unlocked, although the Japanese still held their shoulders against it to prevent the admission of the despised foreigners, concerning whose nature and habits they held grotesque views. A few years later Townsend Harris, who was sent to Japan as American Consul-General, took up his residence there in the face of bitter opposition, and continued there, in spite of dangers and innumerable privations, until treaties were signed that permitted foreigners to enter the country. However, the treaty agreements were made only because the Japanese rulers felt compelled to yield, and not until 1868 did those in authority recognize fully that Japan must abandon

a life of seclusion and qualify for a place in the family of modern nations. The year 1872, when religious liberty was written into the laws of the land, must forever be memorable.

How rapidly the Japanese have gone forward can hardly be understood except by those who have been privileged, not merely to visit their harbors, but to visit the institutions that have been developed within half a century, and to enjoy friendship with some of the people who are striving so zealously for the advancement and uplift of their country. Few lands are so fascinating to the tourist, and perhaps none is more interesting to the student of the progress of peoples the world around. This is the land that will ever be associated with the life and labors of James Curtis Hepburn.

A miniature of Dr. Hepburn's life is thus traced by one of his biographers: "At twenty-six he began work at Singapore; at twenty-eight he was in China; at forty-four he began the chief labors of his life in Japan; and at seventy-seven he came home for rest, little thinking that twenty years of life yet awaited him."

James Curtis Hepburn was born March 13, 1815, at Milton, Pennsylvania, the son of Samuel Hepburn and his wife, Ann Clay. He was the oldest son and next to the oldest child in a family of five girls and two boys. Of his early home life he

rote: "My father and mother were both humble hristians, bringing up their children to fear God, respect and love the Sabbath day, to go to church, read the Bible, and commit to memory the horter Catechism. My mother was especially in-rested in foreign missions."

The future missionary attended Milton Academy, here some of Pennsylvania's most distinguished en were trained. At fourteen years of age he ıtered Princeton, where he was graduated in the ıtumn of 1832, in his eighteenth year. At Prince-n his outlook on life was broadened. As he ex-ressed it, "I awoke to a new life and was born gain of the Spirit." He protested against the udy of Latin, Greek, and Hebrew until President reen convinced him that, since many of the names sed in the natural sciences were in Latin, he could ardly expect to master even chemistry without me knowledge of the classics. How valuable his udy of languages was to him in later years, we ıall discover as we see him a lexicographer, trans-tor, and educator in Japan fifty years later. In-ed, his greatest work would have been impossible ithout his knowledge of the classics. In the light later experiences, it appears peculiarly providen-ıl that he studied the languages so thoroughly ıring his college days. His parents had educated m in the hope that he would enter the Presbyter-

ian ministry. His father's second choice would have been the study of law, but after receiving the degree of Master of Arts, James Curtis Hepburn decided to become a physician. He began the study of medicine with Dr. Samuel Pollock, of Milton. Later he attended lectures at the University of Pennsylvania, where, in the spring of 1836, he received his diploma.

Equipped with a good medical education, he opened an office in Norristown, Pennsylvania; and it was here that he met the remarkable young woman whom he afterwards married, Miss Clarissa Leete. And here, in Norristown, it was made clear to him that his life should be devoted to medical work in distant fields.

This decision to do missionary work was not hastily made. For four years he considered the matter from every point of view. "I did not at first entertain it with pleasure, but more as a stern duty," he said in later life. "I myself tried to cast off this idea, but I found no rest until I decided to go. Everything seemed to favor my going—especially finding a wife who was of the same mind and ready to go with me."

Dr. and Mrs. Hepburn were married in October, 1840, and in 1841, they responded to the call of the American Board of Foreign Missions who desired medical missionaries to labor among the Chinese.

immigrants in Siam. It is not possible here to relate the experiences of the young couple, first at Batavia and later at Singapore, where they decided to locate, instead of proceeding a little farther to Siam. Their stay at each of these ports was brief. The great land of China, a few hundred miles to the northeast, gave signs of opening to missionary work; and the doctor and his wife preferred to reach the Chinese in their homes, if possible, rather than in their settlements on the Malay Peninsula. After stopping a short time at Macao, they proceeded to Amoy, in 1843, where the climate so threatened the life of Mrs. Hepburn that it became necessary for them to return to America, and in November, 1845, they sailed on the *Panama* for New York.

Their missionary hopes seemed blasted. They settled down to establish a practice and a home in the great metropolis. Of their six children, one had died at sea, another in Singapore, and three others died during the thirteen years of their residence in New York. Following the loss of all their children but one, there came a clear call to return to the Orient.

In 1859, there were men in the Far East who understood the significance of events, when Consul-General Harris, overcoming almost insuperable difficulties, succeeded in persuading the Japanese to

sign a treaty that permitted foreigners to live in Japan. Among such men were Dr. S. Wells Williams, formerly interpreter for Commodore Perry, and at that time Secretary to the American Legation in China. A second was the Rev. Henry Wood, chaplain in the United States Navy. A third American was the Rev. E. W. Syle, then the sailors' chaplain in Shanghai. Each of these men agreed to communicate with the Mission Board of his own church, and to urge that care be exercised in the selection of the pioneer evangelical missionaries to be sent to Japan. The prejudice against Christianity had survived through two hundred and fifty years. The word "Christian" had unpleasant associations. Dr. Williams was informed that the Japanese would agree to trade with foreigners "if a way could be found to keep opium and Christianity out of the country." They were afraid of the "pestilential sect called Christians"; and they were not entirely lacking in grounds for their fears. Little wonder that men who knew the situation should insist that Mission Boards in America send to Japan the very best men available. The Episcopalians transferred C. M. Williams and John Liggins from China. The Reformed Protestant [Dutch] Church sent S. R. Brown and Guido Verbeck. The Presbyterians gladly reappointed James Curtis Hepburn and wife, whose hearts bade them go

forth again as ambassadors of Christ. These men in general represented what was really the best in American life.

Dr. and Mrs. Hepburn placed their only living child, Samuel, in boarding-school, and sailed from New York on the *Sancho Panza* on April 24, 1859. Four months and five days later they reached Shanghai, China, where illness detained them several weeks. By the middle of October they reached Kanagawa, which is now a suburb of the growing city of Yokohama. In those days what is now called Yokohama was a mud flat, dotted with a few small huts occupied by fishermen. For a residence, they could find nothing better in inhospitable Kanagawa than an old Buddhist temple which the Dutch Consul had declined to use as a stable. Idols and accumulated filth were removed, while soda and whitewash were needed to cleanse century-old deposits on walls that retained odors of joss-sticks and oil used in worship. Partitions were then put up, to make apartments in which Dr. and Mrs. S. R. Brown, as well as the Hepburns, found a home. Four men-servants were secured for two dollars each a month. From the servants, the carpenters, and visitors, curious to see the "foreign devils" and their queer ways of living, they picked up many words in their practical study of the language of the Japanese.

When Dr. Hepburn entered Japan as a medical missionary, he rented a second Buddhist temple in which he opened a dispensary. Soon multitudes of sick persons came to be treated, until his work was halted. The government closed his dispensary and drove the sick people away. Presently it transpired that its real purpose was to compel Dr. Hepburn and other foreigners to remove to Yokohama, two miles distant, where their lives could be more easily protected, for foreigners were not safe in Japan in those days. Whatever may have been the desire of the government, most of the people hated the "foreign devils" and many were ready to do them violence. Twelve or fifteen foreigners were killed in one year. The English Legation was attacked and some of the guards were killed. The house of the American Minister was burned and his secretary assassinated. For the protection of Dr. Hepburn and Dr. Brown and their families, the government built a high stockade around the temple used as a residence and placed a guard of four soldiers at the gate.

The missionaries were constantly suspected of designs to conquer Japan. Kindly motives and unselfish service were beyond the understanding of the Japanese at that time. Moreover, the white man had established a reputation for subjugating and exploiting weaker peoples. To-day Japanese

laugh at the fears of their fathers, but it was not a laughing matter to the missionaries. Soon after his arrival, Dr. Hepburn found men near his house who afterwards confessed that they were seeking an opportunity to kill him and other foreigners. Another man entered the service of the doctor for the purpose of killing him, but after discovering the real character of the missionaries, he gave up his plan. It required much unselfish service on the part of the missionaries to convince the people that they had not come as the advance agents of conquering military forces.

The Samurai, "servants of the Mikado," descendants of ancient warriors, were the aristocrats of the land; the idle gentlemen, if you please, who were supported by the plainer people. A pair of swords was the badge of this privileged class; and despite all the government could do, their swords were frequently unsheathed. Even in the face of such dangers, the Christian physician went wherever his skill was required to relieve suffering.

When his hospital at Kanagawa was closed by the government, Dr. Hepburn gave himself wholly to the study of the language, and thus the interruption gave him opportunity to prepare for his greatest service to the Japanese people a few years later. However, when ordered by the government to make his home at Yokohama, where he lived

nearly all the time he was in Japan, he reopened his dispensary and treated from six to ten thousand patients annually, until compelled by ill health to give up his medical work.

An intimate friend of Dr. Hepburn's gives this graphic picture of work in his hospital:

"In a room able to hold about a hundred persons, there were gathered daily from twenty to seventy-five persons, of all ages . . . Without fuss or visible emotion, though with real sympathy and profound pity, the missionary physician did his work of relief. Near or around him were from five to ten native youths, most of whom have since made their record as men with the letters M. D. after their names. These were preparing medicine, bandages, or dressings, assisting in surgery, or in preparation of the patients.

"Here was an old man hoping for relief from some chronic disease; and here were mothers, holding up their sick babies to the doctor, pleading for one ray of hope . . . I can never forget those piercing looks into the doctor's face. Frequently their piteous glances or importunate petitions were of no avail. Disease had gone too far, and often death was prompt and merciful. Happy indeed was the doctor himself when, by a pinch of powder, a bolus, a lotion, a salve, a dressing, or a surgical operation, he could bring joy and hope. Many of

his most successful operations had been previously unknown in Japan.

"Around the walls were comforting passages from the Book of Books, rich promises, words of hope and tender consolation, messages from the Great Physician. With the help of interpreters, even in earlier years, the waiting-time and fruitful opportunity made this room often the very gate of heaven to souls, whose ransom from the power of guilt, suffering, and darkness began here. Yes, that dispensary was a Bethel to many of the Japanese. Dr. Hepburn's problems were not geographical, ethical, or philosophical, but immediate and human."

Dr. Hepburn knew that the life of people everywhere depends, for its real nature, upon their faith in God, for unconsciously men become like the gods they worship; he knew, therefore, that men would become righteous as they learned to worship the Sun of Righteousness. His chief contribution was along literary lines, taking a leading part in helping the English-speaking world to a better understanding of Japanese language and literature, and then giving the Scriptures to the Japanese, in their own language. He was certain that Buddhism and Shintoism were insufficient for the moral or spiritual redemption of a people.

After eight years in Japan, he published the first

edition of his Japanese-English Dictionary, on which all others are based. The value of his work, which helped the East and the West to understand each other better, can hardly be overestimated. Very soon after the completion of the dictionary, he began to translate tracts, then the Westminster Shorter Catechism and other Christian literature. Later, he revised translations made by others of books of the Old Testament, and in 1880 he transliterated into the Roman letter all of the New Testament. Meanwhile, he had translated the four Gospels into Japanese.

In September, 1872, the Protestant missionaries in Japan determined to secure the best possible translation of the entire Bible. The country was surveyed to secure men qualified for such an important task, both Japanese and foreigners. The committee consisted of three missionaries, Dr. S. R. Brown, Dr. Hepburn and Dr. D. C. Greene, who were ably assisted by four Japanese, Okuno, Takahashi, Miwa, and Matsuyama. Dr. Nathan Brown also rendered valuable assistance. Five years and six months after the committee began its labors, the New Testament was published. Individuals had brought out translations earlier, but the translation brought out by the committee represented the combined scholarship of many students. In 1887 the entire Bible in Japanese was published. Dr. Hep-

burn was regarded as the leader in this monumental work. Later he prepared a Bible Dictionary in Japanese. In the midst of all his literary work, he found time to preach frequently and to show his interest in Japanese church work.

As he was nearing the completion of his fifteen years of labor in the translation of the Bible, Dr.. Hepburn was notified of his election as president of Méiji Gaku-in [Hall of Learning of the Era of Enlightened Government], the Presbyterian school in Tokyo. Here he served until 1892, when, at the age of seventy-seven, he gave up active work and returned to America with Mrs. Hepburn for the Indian summer of their lives. It has been said that "Perry won Japan from a hermit life, but Hepburn opened the Japanese heart."

How different was the Japan of 1892 from the Japan which the Hepburns had found in 1859! A miracle had happened in a third of a century. "The father of medical science in this part of Asia" had seen the Japanese develop a large number of well qualified physicians. Concerning this development William Elliot Griffis, after the Russo-Japanese War, wrote as follows:

"The Japan of our day is a land that leads the world in military and public hygiene and in successful surgery, while all the records of war, in saving the lives of the wounded, have been broken by a

nation that knows to perfection the fine art of profiting by the experience and abilities of other peoples, but is largely so because of Dr. Hepburn and men like him."

The medical missionary had seen in his work that which should be desired by all missionaries—the development of native forces who will *take the lead* in their own land and as speedily as possible make unnecessary the assistance of foreigners. And that which had happened in medicine was happening in commerce, education, and other spheres. It was beginning to come true in the Christian movement as well. In 1859, Dr. Hepburn had found sign-boards in public places proclaiming Christianity an evil sect which was strictly prohibited by the government. He lived to see religious liberty fully established and Christianity securely planted in the life of the nation. To-day, self-supporting Christian churches, with a membership of a thousand each, may be found, with devoted, scholarly men as pastors.

Upon returning to America, Dr. and Mrs. Hepburn established a home at East Orange, New Jersey. There they lived simply and quietly, as had been their wont in Japan. Perhaps their simple living had helped them to find the hearts of the Japanese. The Emperor of Japan conferred on Dr. Hepburn "The Third Order of Merit of the Rising

Sun, for services to spiritual and educational causes in Japan." The American Bible Society congratulated him, "in view of his preeminent services, as the principal translator of the Japanese Bible." His Alma Mater, Princeton University, conferred the degree of Doctor of Laws. From Japan came messages of love and appreciation. At Yokohama a meeting was held by Christians to celebrate the fifteenth anniversary of his arrival in Japan, and to express appreciation of his work.

On Dr. Hepburn's ninety-third birthday, he received from the president of his Alma Mater, Woodrow Wilson, a message which in part was as follows: "I hope that you realize the high honor in which you are held by all who know you and all who know of your work, and that you realize in particular the very great pride that all Princeton men have in the life-work by which you have won such honorable distinction." At a memorial service held in Japan, soon after the news of his death had been cabled by Baron Uchida, the Mikado's Ambassador at Washington, Dr. Hepburn was spoken of by a member of the Japanese Parliament, the Hon. A. Hattori, as "the man who brought Christian civilization to Japan."

On September 21, 1911, at ninety-six years of age, this noble servant of God, a recognized benefactor of the Japanese nation, passed away, having

been preceded by his wife in 1905. The news of the good man's home-going was received with sadness on both sides of the Pacific. The Japanese Ambassador cabled the sad tidings to his own land. In America and in Japan there were many to give thanks for such a noble life.

It was not strange that the Japanese should have held Dr. Hepburn in such high honor. Dr. Harada, President of Doshisha University, said of him that, while many individuals and agencies had united to advance his nation, "if one name alone were to be singled out, there could be no doubt that name would be Dr. Hepburn's."

In summing up his impressions of Dr. Hepburn, a missionary wrote:

"Zeal and work are great things, but in the long run it is character that tells; and in what high and homely, what lofty and intimate, strains had been sung in the life-song of this man,—physician, translator, teacher, author, and Christian gentleman!"

When one reviews the lives of such men as Hepburn, Verbeck, S. R. Brown, Nathan Brown, D. C. Greene, and other pioneers of broad culture and genuine love for all men, who labor so devotedly, one can easily believe that "the missionary body has been Japan's chief instructor, exerting an influence wholly for enlightenment and for good." And one can easily believe also that missionaries

are often ambassadors of international good-will in a world that is constantly threatened with conflicts between the races of men. James Curtis Hepburn left an impress on the land he labored to enlighten and uplift, an impress that cannot be effaced.

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JOSEPH PLUMB COCHRAN

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THERE is a tradition to the effect that, immediately after the death of Christ, the disciple Thomas went to India, following the course prepared for him by the three Wise Men. It is said that one of the stopping-places on his long journey was by the lake of Urumia, in Persia, where many people were converted to Christianity. Whether the story be truth or legend, it is certain that the group of Eastern Christians known as Nestorians claim the Apostle Thomas as their ecclesiastical ancestor. But it appears equally certain that, had he visited the Nestorians by Lake Urumia, in the nineteenth century, discovering their separation of religion from morals and their gross superstition, he would have renounced his own spiritual children, or at least have called them to repentence.

In 1831, the American Board of Commissioners for Foreign Missions appointed two of its missionaries at Constantinople to visit the Nestorians, who numbered perhaps 100,000, and who lived in Persia and in the Turkish mountains. Many of the Nes-

torians were wild and rough; others, crushed by the warlike Kurds, were docile and desperately poor. The visitors, representing the Christians of the New World, were graciously received, with their message of peace, love, and sympathy. These first missionaries found the Nestorians illiterate. Indeed, there were no books in the spoken language, and only the ecclesiastics and one woman could be found who were able to read the ancient literature. They were poor and they were persecuted by followers of other creeds. Such were many of the people in whose midst Joseph Plumb Cochran was born, in 1855; his father and mother, Rev. and Mrs. Joseph G. Cochran, having reached Persia as missionaries in 1848.

Young Joseph spent most of his early life at Seir, the mountain home of his parents, six miles from the city of Urumia, in Persia. In its sweetness and purity that home was a veritable oasis in a moral desert, where life was wretched in many respects, and often unspeakably cruel in clashes between Kurd and Persian, Moslem and Christian; and it was always overshadowed by the unscrupulous and bloody Turk just beyond the western borders. In such a home, so close always to personal danger, young Joseph began to consider the point toward which he should work in after life.

All the conditions under which the lad was reared

helped to produce a robust character. In his own Persian home and in mission circles he saw men and women who made devotion to God and service to humanity their highest ideals, scorning the dangers to which they were consequently exposed. At fifteen years of age Joseph Cochran came to America with his mother and one sister. His other sister had spent a year in Buffalo, recovering from a severe accident. Joseph at once began attending school, and by the time he was nineteen he had completed the high school course in Buffalo, N. Y.

There was nothing startling in the nature of the young man's call to service in Persia. From his personal knowledge of missionary life, he regarded it as a privilege rather than a sacrifice, and as a path to happiness as well as to usefulness. When word came announcing the death of his father, it seemed only natural that Joseph, still at school, should qualify to follow in his father's footsteps. As quickly as possible he took courses at Yale, at the Buffalo Medical College, and at Bellevue Medical College in New York, securing his degree from the last-named institution. He took extra courses in pharmacy and dentistry, and specialized on treatment of the eye. He spent a year, also, as house physician in the Kings County Hospital.

With this complete equipment, he was appointed, in 1878, as missionary to Persia by the Board of

Foreign Missions of the Presbyterian Church in the United States of America. This was shortly after his marriage to Miss Katharine Hale, of Minneapolis, to whom a large measure of his usefulness and success was due. He met her two years before, just after her graduation from Vassar College. They sailed for Persia, making the journey by way of England, where they visited places famous for beauty or for associations; then they crossed to Rotterdam, going up the "castled Rhine" to Cologne, whose great cathedral they wished to see. It was a brief glimpse they had of it, however, as they were obliged to hasten on to Odessa, and thence, by water, to a seaport named Poti, on the eastern edge of the Black Sea. From Poti they journeyed comfortably, by rail, to Tiflis.

Here the young wife began to realize that she was indeed in a foreign land, for an entire month was consumed in traveling the three hundred miles from Tiflis to Urumia.

Mrs. Cochran was blessed with a delightful sense of humor, for some of the discomforts of this journey are thus whimsically translated in a letter:

"Of all the methods of travel I have tried in the course of my existence that in a *takht-i-ravan* [1] is a

[1] A swinging couch, or litter, attached to two long poles. The poles depend from straps fastened to two mules, one in front of the litter, the other just back of it.

trifle the most insecure. But it is stylish, no doubt. I am considered a person of considerable importance by all whom we meet, for only great people travel in this way.

"I have a white mule in front and a black mule behind. A mounted *charvador*[1] leads the procession, and another follows on foot, to keep the back mule in motion by continual beatings and yellings. I'm sorry for that back mule! Poor beast, he has to walk by faith and not by sight. All he can see in front is blank boards, and when he comes to a muddy ditch, his imagination leads him to think it is an endless sea of mire, and I don't blame him for now and then refusing to set his foot in it, though it does make it rather unpleasant for the other mule and me."

Two weeks after their arrival in Urumia his sister, who was living there, wrote:

"Poor Joe does not have time to breathe in the city. His dispensary is thronged. It seems as if all Urumia had become sick just as he came."

He plunged at once into work and into hard work. Although not twenty-five years old, Dr. Cochran, with his knowledge of the language of the Nestorians, the Mohammedans, and of the Turks, found himself in close relations with all classes, including high government officials, army officers, and the

[1] A head muleteer.

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leaders of various religions, while multitudes of the sick came to him daily.

His wife gives us this vivid little picture of Dr. Cochran's work:

"Joe is so beset with people that he has had to lock his doors to-day while he prepared for the mail. Somehow, I never realized before how the sick thronged and crowded upon Christ during his whole life wherever he went. People do just so in this country. A few Sabbaths ago, Joe went to a village some distance from here. He had not taken off his boots before the sick began to come to the house where he was. Before and after the service it was just so. The next morning he went to another village, and as they heard of his coming, by the time he arrived the sick were all out in the streets, on beds, on donkeys, and on people's backs. Was it not like the times of Christ?"

Although the governor and other high officials turned to Dr. Cochran for treatment, and he was decorated by the Shah, he still gave the greater part of his time and strength to humbler persons. On one occasion, five Kurds made a perilous journey of twenty-five days and reached the hospital with two dollars in money. They had heard that the doctor received persons of all nationalities and creeds, and that the poor were quite as welcome as the rich.

"The poor looked up to Dr. Cochran with a great and grateful awe," a colleague said of him. "I chanced to see, in the compound one day, a poor ragged man reverently lifting and kissing the skirt of the doctor's frock coat, in which he had been calling upon the governor, while the doctor, oblivious of the incident, was talking to another man."

Nearly all of those who were received in the hospital were of the very poorest. On one occasion, nine leprous Nestorians, ragged and blind, traveled fifteen days to reach the hospital. They had passed through a dangerous country, principally by night, sleeping among the rocks in the daytime. Only one of the nine could be helped, and the doctor was obliged sorrowfully to tell the others that he was powerless to aid them. In a single year Dr. Cochran himself would give about 10,000 treatments, while his native assistants would give several thousand more. "There would always be people waiting for him the first thing in the morning," a friend stated, "so that he did not dare show himself before breakfast or there was no knowing when he could get back."

The first hospital in all Persia was simple and inexpensive, and appropriations for its maintenance were small; but within its walls the skilled medical missionary performed such remarkable operations that its fame spread even across to Turkey and into

Kurdistan. Here he trained native physicians and sent them out to heal the sick.

"Persia is a brown and dreary land." This statement is true for the land in general; but wherever water touches the soil, the wilderness is made to blossom. In this it resembles the brown deserts of our own Western country. One of the most beautiful of the oases in Persia is Urumia, the home of Zoroaster. The city of Urumia is in the center of the fertile plain bearing that name; but even Urumia has suffered at times from shortage of food, while less fertile regions frequently have felt the sharp pangs of famine. At such times, starving people moved in mobs and seized food wherever it could be found,—in bazaars or storehouses. A child might be sold for wheat. Beggars cried piteously and people died on the streets. In many instances, and in many lands, the missionary has been the leader, in days of famine, in calling for relief and in distributing food. On Dr. Cochran sometimes rested the chief responsibility for organizing relief forces in Urumia.

In Eastern lands, where so little thought is given by the masses to hygiene and sanitation, plagues of the most deadly character frequently claim thousands of victims. Often medical missionaries are the only persons in large areas with any knowledge of measures to be adopted for the prevention, con-

trol, or cure of the plagues. One such occasion, in the life of Dr. Cochran, was when cholera was reported on the shores of the Caspian Sea and was gradually working its way westward. As the pestilence came nearer to Urumia, Dr. Cochran repeatedly urged the governor to establish quarantine, but all to no avail until it was too late. Meanwhile, the medical missionary published pamphlets in Persian and Syriac on the nature of the plague and how it was communicated. The printed advice was widely read; the native Christian teachers and preachers cooperating with the more enlightened Moslems, Armenians, and Nestorians in the circulation of these pamphlets and in the sale of medicines. When warnings regarding quarantine had been disregarded, and cholera appeared in the city of Urumia, Dr. Cochran and his medical students gave themselves up wholly to the care of the sick. It was estimated that ninety-five per cent of those treated recovered their health. A fine commentary on the directing medical skill!

Dr. Cochran read the medical journals as he had opportunity, and when in Europe or America, he visited the best hospitals. He realized the importance of his medical work in itself, but he was also a missionary of Christ in every aspiration. Once he said:

"The missionary physician should endeavor to

be, as he indeed must be to obtain the highest success, a man consecrated to Christ's service, ever bearing in mind that he, like his clerical brother, represents his King in this land; and everything that he does must conform to this high position, so that his every act and word and bearing shall preach his Master's Gospel." Dr. Cochran's aim was to lead men to Christ. In personal conversation with his patients, in religious services at the hospital, in addresses in the villages, indeed, in all his efforts, he was a true missionary of Christ.

The center of the medical work was the hospital, whose first building was erected in 1880. It was one of several structures on the Mission compound, which consisted of four acres on the banks of the Urumia River, two miles from the city. Other buildings were the college and the residences for missionaries. A wall fifteen feet high enclosed the compound and afforded a measure of protection against wild tribes that hesitated at no foul deed. The staff consisted of Dr. Cochran, Dr. Emma T. Miller, and an assistant Persian physician trained by Dr. Cochran, native nurses, and a class of medical students. Patients were received regardless of race or religion, social station, or ability to pay for the attention received. "Every day there came the pitiable caravan of woe and pain." It was hardly possible for the doctor to journey to the

city or to any village without being stopped by some suffering soul.

In describing the hospital staff, the matron, "a mother to all who came to the hospital," must be remembered. This beloved lady, who helped to create an atmosphere of love and fellowship among the patients, was no other than the doctor's widowed mother.

For many years she devoted herself, with complete consecration, to the work of the hospital, and work of the most practical kind. When she was over seventy years old, she wrote to a friend:

"I have a great deal to do this vacation, getting sheets made for the hospital beds, getting quilts and carpets washed, and all the rooms cleaned. After attending to my duties as matron, I helped Joseph get the dispensary in order. This morning I read awhile in the women's ward. As I arranged flowers in water, and put a little touch of prettiness here and there, the patients watched me with exclamations of delight." In these few lines the elder Mrs. Cochran has drawn a picture of herself that could not be more complete if an outsider had devoted pages to the subject.

Long journeys were required at times, and the highwaymen along the travel routes cared nothing for the medical man whose work had given him such a large place in the respect of those who knew

him. It was necessary, therefore, for Dr. Cochran to travel with armed escort at times, and for members of his party to carry revolvers and guns, perhaps riding at night with hands on their firearms. Frequently chiefs or government officials, desiring medical attendance in their homes, would send soldiers to protect him. The land was full of dangers.

Soon after the young physician reached Persia, the great Kurdish chief, Sheikh Obeidullah, who, next to the Sultan himself and the Sherif of Mecca, was considered to be the holiest of all the Sunni Mohammedans, invited Dr. Cochran to visit him in Kurdistan and to prescribe for him. The Sheikh was a descendant of Mohammed, was a man of real character in some respects, and desired to establish Kurdistan as a free state and himself as governor of all the Kurds. He also desired the friendship of foreigners, which may have prompted the invitation to Dr. Cochran, who, in order to reach the home of his distinguished patient, traveled two and a half days, under the protection of a Kurdish officer and fifteen soldiers furnished by the Sheikh. At Nayris, the capital of Kurdistan, three chiefs with their retinues came out to greet the physician, one of them having been the head of a band of outlaws who had attacked Dr. Cochran's father and attempted to kill him twenty years before.

The doctor was given a royal reception by the

Sheikh, whom he found to be a man well read in Persian and Arabic literature, acquainted with the Bible, and apparently a pious man, attempting to rule his people justly. He was eager to have the outside world know that in wild Kurdistan there was a government with laws superior to those of Persia and Turkey. The Sheikh was found to be quite ill, but during the doctor's stay of one week, he desired his visitor to spend hours of each day in telling him of the wonders of the Western world. This visit was to have some exciting results in days to come.

Sheikh Obeidullah had in some way been offended by Persia. Moreover, he desired to include in his proposed free state the Kurdish section of north-western Persia. His son was sent to Urumia to confer with the government, and, very naturally, he was entertained by Dr. Cochran. The son's negotiations at Urumia were disappointing, and a few weeks later the Sheikh came down with an army and laid siege to the city, after taking possession of some of the coveted territory. The Kurds living in Persia, who had been sent to oppose the Sheikh, joined him in his attack. At one city where he demanded food his messengers were killed, and in retaliation he ordered his soldiers, in taking the city, to slay even women and children. The Sheikh's friendship for Dr. Cochran gave the Mission a sense

of security, but the visits exchanged, and the friendship which protected the American Mission from the Kurds, led some of the Persians in Urumia to charge Dr. Cochran with the responsibility for the war. The position of the Mission was embarrassing and perilous. Although the governor probably did not believe the stories, such talk among the people might lead to an attack on the Mission by the maddened Persians, or, even if that did not occur, enmity might be aroused which would make it impossible for the missionaries ever again to be trusted by the people whom they had come to help. Meanwhile, the Sheikh kept sending letters to Dr. Cochran, and knowledge of that fact caused Persians to believe that the two were in league. Any attempt to make explanations to the governor would have angered the Sheikh, whose forces were destroying villages on every hand.

Finally, the Sheikh's armies defeated the Persians, and the Kurds advanced upon the city. At the request of Dr. Cochran, the Sheikh ordered his men not to molest non-combatants. A fresh Persian army was known by the government to be moving toward Urumia, but the city seemed certain to fall into the hands of the Kurds before it could arrive, since no one was left to fight except the populace. At that moment, the Sheikh sent for Dr. Cochran, while at the same time the acting-governor of the

city desired him to ascertain what terms could be made with the Kurds. The Sheikh was determined to attack the city, unless the people yielded, and it seemed futile for them to resist such overwhelming forces. It appeared so useless to sacrifice the city and its people that Dr. Cochran and the British consul at first advised the acting-governor to surrender. They consented, however, to ask the Sheikh to allow the city one more day to come to terms. The Sheikh replied that, for Dr. Cochran's sake, he would delay the attack until three o'clock the next afternoon. At three o'clock the next day, the hordes of Kurds moved upon the city, but the governor had just arrived with about two thousand men. When the Kurds were seen advancing, Dr. Cochran was importuned to go out and meet the Sheikh and request a further delay. He told them it was too late, but he would try. Upon failing to reach the Sheikh, and being told that he would not listen again, the doctor turned his horse and rode quickly towards the city.

"What shall we do? What shall we do?" cried those in authority.

"Surrender," said Dr. Cochran, "if you cannot keep the city. If you can, then fight; that is your duty."

With the resistance of the army just arrived, the Sheikh found he could not force an entrance into the walled city in an hour, nor in a night. The delay

of twenty-four hours had played havoc with the Sheikh's plans. Fresh troops had quickly made the walls defensible, for at least a time. Then came the report that Turkish troops were on the border, with orders to the Sheikh, who was nominally a subject of Turkey, to abandon his invasion of Persia. The people of Urumia proclaimed Dr. Cochran the savior of their city, since he had negotiated the delay of twenty-four hours, which allowed the Persian general to bring in his army in the nick of time.

On one occasion, when a man of lofty station was about to visit Urumia, Dr. Cochran went with many others to greet the potentate. In Persia, every available doctor is consulted, as a matter of course, and a proper verdict is expected, even after a casual examination of pulse and tongue. When Dr. Cochran greeted the titled visitor, the latter at once extended his wrist, expecting an exact diagnosis in consequence. Dr. Cochran, however, with his knowledge of Persian etiquette, was quite equal to the occasion. After feeling his pulse, the possible patient demanded to know "how it felt." "It feels," gravely responded the doctor, "as if royal blood were coursing through it."

Did the Oriental mind detect the humor?

The busy physician could secure little rest anywhere in Persia. He might close his hospital and

take to the hills, but suffering humanity sought him there. After ten years of taxing service, he was compelled to seek rest in America.

"Hakim Sahib"[1] was the name given to Dr. Cochran throughout Persia. Upon his return from a second furlough, after twenty years of missionary service, the announcement that "Hakim Sahib" had come back was received with enthusiasm in Urumia. Three hours' travel from the city, a large company met him. Numerous Christian converts greeted him. The Persian governor and other dignitaries sent personal representatives to participate in the welcome. A carriage with outriders was sent by a Mohammedan nobleman for "Hakim Sahib's" use. Later came three other carriages offered by the nobility. Three handsomely caparisoned horses were sent by Persian officers to be led in front of Dr. Cochran's carriage. The procession grew until it included hundreds of persons as it neared the city. In a few days all the prominent noblemen near by and some Mohammedan leaders had called on him. In a letter to America the modest man merely said: "I had planned to write you by the first post after our arrival, but my time has been very fully occupied by the numerous calls

[1] Hakim is the Persian word for doctor, and Sahib, meaning master or sir, is the respectful term of address applied to foreigners in Persia and India.

from all classes and creeds. We have had a very cordial and hearty welcome back." Who would guess, from this simple statement, the honors and the goodwill that had greeted him!

The gratitude of the poor people in distant villages was often very touching in its expression when they discovered "Hakim Sahib" in their midst. Once he related this incident:

"Returning from Tabriz last fall, I came to a Kurdish village. I was acquainted with the chief of the village, and knew that it would be impossible for me to make myself known to him without being delayed, and I had promised to spend that night some fifteen miles further on with a Khan [nobleman] who was ill. I had told the men who were with me that I did not wish them to inform any one about the village who I was. As I sat under one of the trees and began to eat my lunch, one elderly Kurd came up towards me, and took a seat at a little distance from me and somewhat behind me. He was inclined to be very sociable and full of inquiries, while I was reserved. He finally asked me if my head comprehended any medicine; and I replied that it depended upon the gravity of the case that he wished to report to me. He told me of the symptoms of his son's illness, and said, 'Oh, if I could only get him to that American doctor that lives in Urumia, and have him kept in the hos-

pital a little while, I know he would get well, for I was treated there myself for pneumonia about twenty years ago; and, aside from being cured of my disease, they did so much for me, and were so kind to me, that I should have been willing to have been sick there all my life. Especially was the doctor's mother kind to me.' As he spoke he gradually approached me, and I noticed that he was scanning me closely; finally, he caught hold of my shoe, and pressing my foot, he said, 'I swear, I half believe, that you are that doctor yourself! I swear you are that doctor! I adjure you, by the living God, tell me, are you not?' He was now clinging to me and wringing the skirts of my coat. When I had to admit that I was the man he described, he made me promise to wait until he could bring to me his son. Soon he returned, with his son on the back of another man, with his wife and his son's wife, and several little children, and four or five neighbors. They came laden with clover for my horses, they brought bread and butter and milk and curds. Although I had eaten my lunch, they insisted that I eat their bread, so I partook of this gift, and then they took the remainder and made my men finish it, while the horses were made to eat their clover instead of that which we had already bought. I prescribed for their sick, and then mounted and rode off, with five or six of these men as my escort

on foot. They wished to come with me all the way to the end of my stage, as they feared I might be robbed, it was getting so late, but I declined their offer and hurried on."

His sister wrote of him:

"I remember a journey to Van, Turkey, in 1886, I think. Coming back, we took a cut right through the mountains among the wildest Kurds. Almost everywhere we were asked if we were the people of the 'Hakim Sahib,' and great was their delight when they found that he himself was there. One night, after a very bad day of pouring rain, during which the packhorse with the bedding got carried down by a mountain torrent for some distance, soaking the bedding, we at last halted at a little village, way up among the clouds and snows, though it was summer. We were nearly frozen, for it was a great altitude, the horses were exhausted, and we ourselves dripping. Now, every one who has lived in Persia knows that if there is anything more objectionable to a fanatical Moslem than an ordinary Christian, it is a wet one, and these mountain villagers seemed the most fanatical of the fanatic, and not even a stable was open to us. From hovel to hovel we went, offering good pay, and at last it seemed as if we should have to put up our wet tent and sleep under it, while the poor horses were in the open. Just then a man came along, and peer-

ing into Joe's face, gave a cry, and seized his coat, and began kissing it. It was the old story—a hospital patient—and we knew our troubles were over. The best he had, which was a large room inhabited by his whole family and the animals to boot, was at our disposal, and the shivering horses were led in, too. We found the corner, which was the living-room, swept clean, and with some signs of comfort, and the beaming host explained to us that on his return he had tried to teach his wife to keep things clean as the 'great lady' did the hospital. I remember with what trouble Joe persuaded them the next morning to accept at least enough to cover the actual food and fodder used by us—they were evidently very, very poor, but they did not wish pay. That evening half the village came in, and many said, in a half-astonished way, 'if you had only told us at the beginning who you were, none would have refused you shelter, for many of our tribe have been in your hospital, and have told us of you and your mother, who is as a mother to all the sick!'"

It is difficult to believe that any one could hate such an apostle of loving service, but even "Hakim Sahib" incurred the bitter enmity of certain Kurds by seeking to have them brought to justice for their deliberate murder of blameless Christian people. He soon knew that he was a marked man; that the Kurds would slay him at the first opportunity.

Such a strain was already telling on his health, when a tragic occurrence cast the mission and the entire Christian community into gloom. On March 4, 1904, several of the missionaries started for Russia. Dr. Cochran's enemies understood that he would be one of the party, and they arranged with confederates to follow and, when outside of the Urumia district, to kill the physician. The Kurds had been misinformed, for Rev. B. W. Labaree, and not Dr. Cochran, was to accompany the party. Mistaking Mr. Labaree for Dr. Cochran, the Kurds cruelly murdered him in one of the mountain passes.

Mr. Labaree's death caused Dr. Cochran profound grief. His hair whitened rapidly, as he dwelt on the thought of a person dying in his stead. However, he was never free from a sense of peril. He could sit in no room at night without drawing the shades. Think what this meant! The cruel Kurds might secrete themselves anywhere to murder the man who wished to bring them to justice for some of their foul deeds. The strain was too severe. At last, as he was visiting his patients, he fell ill with a fever that stole his senses.

The illness of the good man plunged the populace into grief. Congregations on Sunday abandoned the usual form of service and gave themselves to supplication for his recovery. Moslems joined Christians in prayer. Some Mohammedans ex-

claimed, "Would that God would take us and spare him!" A little boy in the hospital said he would be happy if only he and his mother could die in place of "Hakim Sahib." But the end was at hand. On August 18, 1905, this loyal servant of God went to his eternal home.

Syrians wept, and many Moslems wore mourning for a Christian. Seldom have so many religions been represented at a single gathering, for at the funeral were Christians of the mission, Syrians, Russian ecclesiastics, Chaldeans, Moslems, Kurds, mountaineers and Persian noblemen. A native preacher said in his address:

"The glory of Urumia has departed with the departure of Dr. Joseph P. Cochran. The splendor, the ornament of the country is gone, since the greatest, the saintliest man who ever lived in it has gone forever."

A missionary associate, Rev. R. M. Labaree, who had left a pulpit in America to take up the work of his martyred brother, wrote of Dr. Cochran as follows:

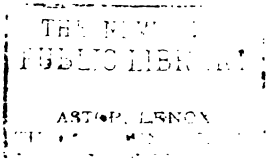
"For days the governor and the principal men of Urumia had been sending around men to inquire as to his condition; missionaries and every one connected with us were repeatedly stopped in the streets by total strangers to be asked in regard to him. The last night of his life all the people in the

college yards assembled about the house, weeping, and several slipped up quietly to get one more glimpse of the face they loved so well as he lay on his bed, unconsciously breathing out his life. And when the end came, every one in Urumia felt that he had lost a personal friend—people in every walk of life, from the governor, who burst into tears on hearing of the news, to the poorest beggar. . . . What sort of man was this who could so impress himself upon high and low, upon Nestorian of every form of faith, upon Persian, Armenian, Jew, and even Kurd, as his own personal friend! And I could not but think how cheap would have been the reputation and wealth that doctor could have easily attained in the homeland compared with the love and the trust and the almost worship that he has won here in Persia."

Concerning the value of his services in Persia, Dr. Cochran was rarely modest. Seldom could he be persuaded to speak of his own work. "In 1889," wrote one of his sisters, "when my brother visited my home in Sparta, N. Y., he yielded to my wishes, and spoke in our church one Sunday evening. It was always hard for him to talk about work in which he had taken a prominent part. I wanted him to tell about the circumstances leading to his receiving the decoration from the Shah, and to show the stars to the audience. But with his char-

acteristic modesty he went to the service without them, and they were only shown when my husband in the pulpit, against my brother's protest, fastened them upon his coat while he was speaking."

What was the secret of "Hakim Sahib's" power? What was the secret by which he caused all men to look upon him as a brother and a friend? The answer is simple. In response to a disciple's faith and self-surrender, the Christ was living again through the disciple before the people of Persia; and "The Life was the Light of Men."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American Baptist Foreign Mission Society.

CATHERINE L. MABIE
OF THE CONGO.

"WITH THE MASTER'S CLEAR CALL TO AFRICA **RINGING** IN MY SOUL, I CANNOT, I DARE NOT, GO **ELSEWHERE.**"

VI

CATHERINE L. MABIE

"YOU might as well try to convert cattle! You might as well try to convert cattle!" The American visitor to an interior Congo village, with its inhabitants who seemed so little removed in nature from the animals of the jungle, did not believe it, but the words attributed to Darwin came to his mind and somehow they would not go away. "You might as well try to convert cattle!"

The village was on the bank of the great Congo River, four hundred miles from the mouth of that dark torrent, which flows for thirty-five hundred miles on its course from its fountain-head to the sea; and serves, with its almost innumerable tributaries, to drain the jungles of the great basin of Central Africa. Here Henry M. Stanley had paused on his journey of nine hundred and ninety-nine days across the Dark Continent, when he followed the Congo River for the greater part of its course, and drifted in dugout canoes on its swift current, except when he encountered long stretches of cataracts for which the stream is famous. The

man who, on an earlier tour in Africa, had found Livingstone, and who afterwards went to the relief of Emin Pasha, had hardly been acclaimed as the first man to succeed in crossing Equatorial Africa, before certain benevolent Englishmen began to plan for the missionary occupation of the country.

Stanley reported on the appearance, customs, and general character of the people, in what is now known as the Congo. None of these natives, living far from the seacoast, had ever seen a white man. The people were amazed not only at the color of Stanley's face, but perhaps fully as much by the fact that he was dressed, or that he was "in cloth," as they expressed it. So they did not call him the *white* man. They called him "Mundeli," which literally means "in cloth." To this day, all over Congo Land, the Bantu people call the white man "Mundeli." Later, when the white man began to use dynamite to remove stones that obstructed the passage of steamers on the lower Congo, they gave Stanley the special name "Bula Matadi," or "Breaker of Rocks," which name was used, too, for the government he established, the old Congo Independent State. It has been passed on, even until now, as the title the natives use in speaking of the foreign administration of affairs in their land, now a colony of Belgium.

The missionaries found an unpromising people,

the dark brown negroes of the great Bantu tribe. These objects of missionary effort were low in the scale of human progress, being among the most primitive of the primitive races. They had never even dreamed of a written language, and they were scantily clothed. Many women wore heavy brass collars weighing twenty-five pounds or more. These collars were slipped over their heads when they were girls. When they became women, the burdensome decorations could be removed only by cutting the collars with files. In sections where cannibalism prevailed, men's teeth often were filed to sharp points. Slavery was common. Polygamy was popular. A great chief might possess scores, or even hundreds, of wives, some of whom very likely would be buried alive with his dead body. The unseen world was full of evil powers, and the hope of the people was in fetishes, which they believed would ward off the evil spirits. There was a god, Nzambi, but he was far off and cared nothing for them. They believed him cruel, too, since the forces about them seemed cruel. Why should they themselves be otherwise?

Was it strange, therefore, that the American visitor to the Mission station, four hundred miles up the Congo River, after seeing such creatures slipping into their small, dark, grass houses, should recall Darwin's words? That night, on the Mission

compound, which lies between two Bantu villages, he fell asleep with strange pictures floating through his brain. And with the pictures came the words that would not down, "You might as well try to convert cattle!"

But the next moment, apparently, there was more evidence that must be considered. It was again daytime. The visitor was wakened by singing in the chapel beyond the cocoanut palms and banana trees. The words were strange, but the tunes were familiar: "We Have Heard the Joyful Sound, Jesus Saves;" "Jesus, Lover of My Soul;" "Nearer, My God, to Thee."

And they did more than sing. The two hundred members of the church worshiping there were supporting sixteen of their own number as teachers and evangelists in the villages of the hinterland. It had been only a third of a century since Stanley passed that way the first time, and not as long since the missionaries had begun their work in Congo.

Among such a people, although at another station than the one to which reference has been made, a young American woman felt called of God to spend her life. And she had no doubt as to her divine call. When she applied for appointment to the Women's American Baptist Foreign Mission Society, she was asked if she was willing to go where her services appeared to be most needed. She wrote

frankly in reply, "With the Master's clear call to Africa ringing in my soul, I cannot, dare not, go elsewhere."

This young woman was Dr. Catherine L. Mabie, the daughter of John S. and Catherine L. Roe Mabie, who were living at Rock Island, Illinois, when their daughter was born. Regarding the influences that were responsible for her missionary ambition, she has written, by request, as follows:

"I have a strong conviction that hereditary forces were far more potent than environment or training, in my decision to enter missionary service. A long line of godly ancestors had devoted their own and their children's lives to interpreting God's love to their fellows—from Greatgrandfather Steadman, the genial founder of Mechanics' Institute and Rawdon College in old Yorkshire, intimate comrade also of William Carey, to Mother, who like Hannah of old prayed for a son and that he might be a missionary."

Dr. Catherine L. Mabie, who never knew her mother, had not the slightest suspicion of her mother's ambitions and prayers until after her appointment as a missionary, when it was revealed to her as a wonderful confirmation of a right choice of life-work. "A friend's quiet question as to why I did not enter foreign missionary service, was the first force of which I was conscious in the choice

of work. But back of it were older, more potent, impelling, and staying forces."

Before taking up the study of medicine at Hahneman Medical College, Chicago, where she received her degree, Miss Mabie had taught for two years in the public schools of that city, an experience which was a delight to her. It helped to prepare her for the demands that would be made on her in later years in assisting in the development of the educational mission work in Congo. Soon after the completion of her studies, she was on her way to Africa.

The voyage to Africa, in the summer of 1898, was a trying experience for the rather timid young woman. The steamer "down the West Coast" was not comfortable, with the captain and many of the passengers drinking to excess every night. Then there was another and a harder experience. The young woman's heart had been strangely drawn to the black people of Africa, but she had not been thrown into contact with the negroes in America. At Sierra Leone, the first port of call on her voyage to Africa, the native boys, in their scanty clothing, came scrambling up the sides of the steamer, from their canoes, like so many black ants.

"It struck me squarely between the eyes," she wrote. "Could I ever really care enough for these people to live among them, and serve them, and be

to them in my measure what Jesus was to the people among whom he lived? For days I was blind. I knew perfectly well that, unless I could so care for them, I might just as well turn around and go home, for only so could it prove worth while to plant myself among them."

Upon her arrival in Congo, she was assigned to Banza Manteke, where some years earlier there had occurred a very remarkable religious awakening among the natives, under the preaching and living of the Rev. Henry Richards. When she sat at the communion table the first time, with four other missionaries and five hundred black people, decently clothed and rejoicing in a religion which cast out the fear of evil spirits and death, she received her spiritual sight and realized that she cared enough to stay. They would soon understand that she "cared." Perhaps they would come to know that Nzambi (by which name they alluded to the Savior) cared, for she claimed to be Nzambi's servant. In time they did come to know, and they called her "Nzambi's Doctor," a title given to more than one medical missionary in that land of fear, sickness, and death.

Dr. Mabie found no well-appointed hospital for her use at Banza Manteke. A small wooden dispensary had been erected at that place by an earlier medical missionary, Dr. Leslie. A few feet away

from that structure there was another small building with walls and roof of corrugated iron—two bare rooms, by courtesy called a hospital. But she did not wait for better equipment. Year after year she made use of what she had, and gave a striking example of what a doctor can do, as physician and religious teacher, with next to nothing in the way of a hospital. She realized, however, that the work would have been done better, from the professional viewpoint, and possibly more people might have been treated, with proper equipment. Still, difficult operations were performed in "the little tin hospital."

Hundreds came there for help. Among them was an old chief, badly lacerated by a buffalo he had wounded. His girl-wife was charged by a jealous older wife with having cast an evil eye on the fetish, when she fastened it to the old man's wrist as he left his home to hunt the buffalo. When fever set in and his mind began to wander, the witch-doctor of the village bled him "to let out the evil spirits." Meanwhile, little Nsimba, the chief's nephew, recalled that in one of the market-places he had heard of the white woman doctor at Banza Manteke who had done wonderful things for the sick and wounded. Perhaps she could help his uncle. The chief was willing to make the experiment. So they placed him in a red blanket tied to a bamboo pole,

and, with all his wives and relatives, he was taken the several days' journey to the Mission hospital. At first it seemed as if he could not live, but in time he was well and able to return to his own village. And little Nsimba was left behind with the doctor, to attend the Mission school and to learn to dress wounds.

The people came great distances for treatment, often expecting immediate relief, or to be able to take home next day sufficient medicine to insure recovery. On a busy day, before the bell announced the opening of the dispensary, the crowd gathered, —men, women, and children—all carrying jars, cups, tins, or bottles, seeking medicine for themselves or their friends. Occasionally one would bring a dozen receptacles, from as many sick people in his village, and be able to tell little regarding the ailment of any one of the sufferers. Often, to the native, medicine and magic are synonymous; hence the "medicine man" or witch-doctor of Central Africa. The native African attributes all physical suffering to the work of demons. Persons suffering from epilepsy and insanity are thought to be possessed of evil spirits. Was it not like this in the days of Christ?

The natives have a few astonishing remedies of their own; for instance, in certain cases the flesh is cut or blistered; in other cases, red pepper is

blown into the nostrils or eyes. Aching teeth are dug out. But the witch-doctor is the chief reliance in sickness; and since the native "medicine man" is supposed to deal chiefly with the spirit-world in relieving sickness, he is the nearest approach to a religious teacher, so the medical missionary finds a field peculiarly prepared for spiritual work. Into such a world of superstition and intense fear of death went the medical missionary, healing the sick and "looking death squarely in the eyes and holding him at bay."

Dr. Mabie has done her part in driving out smallpox, which was once a dreadful scourge everywhere in Congo Land. The Belgian government gladly furnishes all doctors with vaccine. Dr. Mabie has done her part in teaching the natives that the "sleeping sickness," which has carried off millions of persons in Central Africa, may be avoided if one escapes the bite of the tsetse fly, and a wide campaign of education in this matter has been conducted in the villages. She has done her part, too, in teaching the people how to combat tuberculosis; and, with a woman's heart, she has done a great deal to relieve persistent skin disorders in little children.

But her chief interest in these people is in their deliverance from their spiritual disease and bondage. "To make God near and dear to those afraid of Him" is the object of her service. Medicine and

surgery are parables through which she seeks to interpret the love of Christ. What could be better than to teach such children of the hill and jungle that God is love, and that no one should be afraid of Him?

From the beginning of her work, Dr. Mabie regarded the dispensary and the "little tin hospital" as experiment stations for the propagation of the Christian doctrine. Back to their villages the patients went, disseminating new thoughts, the very newest and strangest of which was that Nzambi is loving and merciful, and never far off from those who seek him. Every night these new thoughts were talked over as darkness settled over Africa, and returned patients repeated to their neighbors around the village fire the wonderful new messages that regenerate hearts and transform lives. And since personality, rather than material equipment in itself, is the needful power, Dr. Mabie gave herself, happy in the consciousness that she might be like a spring in the desert, imparting life to others. She found a bright side to her lack of equipment, since a good hospital-plant with a large body of patients would have made it impossible for her to do work in other settlements. The village work and cross-country tours, with native assistants, gave opportunity to heal the sick and to relieve hearts of the terrifying fear of the unseen.

Since there was no appropriation from the Board to cover the expense of country tours, the doctor decided that the people of every village desiring a visit should furnish transportation for her and her supplies. This they always did, cheerfully. Eight porters were required for hammock, bed, small tin trunk, chop-box [food] and medicine-chest. A tent was not needed, for usually the best grass-hut in the village was made ready for her. She always traveled overland, in a hammock suspended from a long bamboo pole resting on the shoulders of two or more strong porters. This is the only practicable mode of transportation in many sections away from the watercourse, where there are no roads except the narrow, rough paths that are at times overhung with the tall elephant-grass, twelve feet or more in height.

Sometimes swollen streams proved troublesome. Once she and the porters waited three hours on a river bank, as night was coming on, and they were far from any village. She persuaded the hammock-carriers to try to cross the rushing stream by loading the hammock with boxes, which were taken over successfully. Then, with the hammock tied as closely as possible to the pole, the doctor was carried across; but even then the water came into the odd conveyance. On another occasion, it was necessary to cross a rushing torrent on a moss-

grown, slippery log, three feet under water. Once a buffalo in the path caused a panic among the porters leading the way. Sometimes canoes were used on the river, where mother hippos, with ugly hippo babies on their backs, came close to their visitors. Once the native paddlers took the canoe too close to a family party, when the old hippo made an alarming demonstration. The danger from maddened hippos is well known. But in many hundreds of miles of travel, by hammock and canoe, Dr. Mabie never had a serious accident, and she never received anything but considerate and courteous treatment from native carriers and paddlers.

Some days, while abroad on her missions of mercy, there was scarcely time to eat. Many sick persons were helped who never would have made the long journeys to Banza Manteke. The day schools in the villages, supported by the mission, were inspected. The native Christians were encouraged to give of their means for the support of preachers and teachers from their own ranks as missionaries to other villages. Often the response was large indeed, considering their small earnings. If they could do no better, they brought baskets of peanuts from their gardens, and the peanuts were converted into money. Of one of these demonstrations of missionary enthusiasm, at the close of a five-day conference, the doctor said:

"How I wish you might have seen the response. In many a day my heart has not been so cheered. Old and young, with shining faces, brought their gifts and cast them into the Lord's treasury. Little children crowded around with their little baskets of peanuts; one mother with month-old twins came up with one baby in each arm, a cup of peanuts in each hand, the babies' first gift. The audience sang one hymn after another, while many went to their houses to bring over and above what they had purposed giving. When we arose and returned thanks for the willing hearts, there were sixty-five francs[1] in the pastor's hands. All over the town little groups were singing for an hour or two after the service. These francs, plus the free transportation, equal to sixty more francs, were over and above the pledged contributions. Weary but happy, with my voice quite gone, I prepared for the return journey on the morrow. Opening 'My Counsellor' to the day's lesson, I read 'Thy people shall be willing in the day of the power. Is not this His day?'"

After such an experience, Dr. Mabie found the volunteer carriers fairly flying over the ground next morning, unwilling to let her leave the hammock, even for the steep hills. On these tours she gave much attention to mothers and children. She was

[1] A franc is worth about twenty cents.

never happier than when talking to a group of women, or when surrounded by a crowd of dirty, half clothed, "star-eyed black kiddies," learning, for the first time, the story of Joseph the dreamer, of Daniel the brave. The value of such work is illustrated by the mental and physical growth of little Nsimba, the nephew of the old chief, who was left with the doctor to attend school and to learn to dress wounds.

Nsimba's twin had died in infancy, and according to Congo custom, the brother must wear a little wooden image of his dead sister on a string around his neck. The image represented the twin, whose spirit was always near him. Everything of importance done for him must be done for the image also. Often, when she had vaccinated a baby, Dr. Mabie would be asked to vaccinate the image on the string about its neck. When Nsimba returned to his home for a visit, after several months at Banza Manteke, his mother was careful to ask about the image of his sister.

"Yes, Mother, I wear it always," he answered. "For many nights after you had left me, I held it tightly until I slept, but these nights I am forgetting fear. Listen, Mother. The white woman of God tells me that my little twin sister will not harm me; that she plays in the town of God where it is never dark and children see no fear. When I

asked how she could find her way to the town of God,—and she so little—the white woman told me that Jesus, the son of God, carries the little ones in his arms all the way, and that perhaps God's town isn't really very far away. It just seems far because our eyes can't see it."

"It is a fable of the white people, my son. Our fathers never heard of such a town. There may be one god for the white people who are not really people,—but for us black folk of the grass lands? No, it cannot be, else we should have heard. Is it not the spirits of our dead who make us sick, who haunt the paths and shadow our lives always? Trust not the talk of the white woman but wear your twin fetish by day and night."

"But, Mother, the white doctor tells us that mosquitoes, not spirits, cause us to burn with fever. The medicine she gives quickly cools the hot skin. She says tsetse flies bring the terrible sleeping sickness and not angry spirits. Truly, she is very wise, wiser than we. She says that God loves us to trust in Jesus instead of in fetishes, and every night she asks him to guard and keep us safely through the night, to help us to follow Jesus every day, and give him all we have."

Many months passed. One evening the doctor was stopping in Nsimba's home town. The old chief had set apart the cleanest house in the village

for her and gave her a fowl for supper. After supper the doctor proposed that, instead of a talk from her, the boys who had come with her should tell Bible stories to the people sitting in a circle around the fire. This was a difficult task for Nsimba, in his home town, and before his chiefs. But he at length told them the wonderful story of a great chief who had made a strong fetish, before which he commanded all the people to bow. All the people bowed before the fetish except three slave boys, taken in a raid, who had no fear of evil spirits since they were people of God. When they would not bow before the fetish, the chief threw them into the fire, but no harm came to them, for their God was a real God. Then Nsimba told how, for two years, while at the Mission, he had kept his mother's command and had always worn his twin sister's image. But he had decided to be one of God's people. He would wear a fetish no more. Walking over to the fire by his mother's house, he dropped the image into the coals. It was a significant act. When he was baptized he chose a new name—Daniel Nsimba.

Dr. Mabie never lost her love for teaching. She saw, too, that in a land like Congo, where the climate is peculiarly trying for white persons, it is of the utmost importance that the natives be trained for leadership. So when she was invited, in 1911,

to become a member of the faculty of the Congo Evangelical Training Institution at Kimpesse, a small place about a hundred and fifty miles from the coast, the opportunity seemed in keeping with her preparation, qualifications, and convictions. There were numerous village schools of low grade, and boarding schools also, at the principal stations. But an institution was needed for the training of native teachers, preachers, and other leaders. Such a school had been established at Kimpesse, the American Baptists uniting with the English Baptists in its support, and both Boards furnishing missionary families as members of the faculty. Dr. Mabie seemed especially qualified for work among the wives of the students, as well as for general duties and medical service.

For three years at Kimpesse the entire families of the native leaders are under cultivation,—spiritually, mentally, physically. Classes are held for five and a half hours in the morning. Afternoons are given to industrial training, gardening, and a school for children in which teachers receive practical instruction in methods. The evenings are given to study. The women attend classes for three hours a day. Emphasis is placed on the industrial features. Dr. Mabie gives much attention to physiology, sanitation, and hygiene. She endeavors, also, to enable the families to establish, in their own

villages, homes which, in the care of children, the protection of health, industry, and Christian living, will be models for other natives to copy. The mothers are given opportunity to see how the doctor cares for them, and how babies should be tended in a land where, largely on account of improper diet, infant mortality is high. Hundreds of practical things, including "first aid" and nursing, are taught these women, which they, in turn, can teach others in villages that the missionary will never visit. The families trained at Kimpesse will be the leaders in their districts.

Stated in practical terms, the school at Kimpesse attempts to confer the following benefits on the women students: To make them better wives and mothers, more companionable and helpful in their husbands' work as teachers and evangelists; to acquaint them with the causes of simple diseases prevalent in the towns, and the care of babies and young children, among whom the death rate is appalling; to give them simple, sane, dietary rules, and better ways of home-making, gardening, and sewing; to give them a working acquaintance with the Gospel, some old Testament stories, and also other stories suited to the understanding of children; to give them simple, practical instruction in their duties and privileges as Christian members of the community and church; to instruct them in pri-

mary school teaching; and to train some of the more promising as neighborhood nurses.

In September, 1918, Dr. Mabie, after a visit to her native land, sailed again for Congo, with other missionaries, braving several submarine zones on the long journey to Africa by way of Europe. When asked at that time for information for use in this volume, she modestly replied in part: "Really, there is nothing to tell. My work has been within very narrow limitations and in no wise ever spectacular. It would seem to me that the only possible way to make me twinkle, even occasionally, among your galaxy of stars, will be by using me as an illustration of what can be accomplished in missionary work in a very primitive stage of development, by a doctor with next to no equipment."

It is said that "a poor workman blames his tools," but when a woman accomplishes, in a quiet way, all that Dr. Mabie has accomplished, and finds no fault whatever with poor tools,—surely we may accord her a full measure of respect and admiration.

VII

PETER PARKER

VII

PETER PARKER

ABOUT three hundred years before the birth of Christ, the Chinese built a great wall fifteen hundred miles along the northern borders of the Empire, as a barrier to the hordes of Tartars who constantly threatened to invade the country. This wall, twenty-five feet high and forty feet broad, crossing valleys and mountain ranges, is typical of its builders and of their descendants, who for thousands of years resented every suggestion of a welcome to the ideas of other nations. They were satisfied with what they had inherited from their ancestors, and they believed that they were superior to other peoples. Why should they change in any respect? And why should the Chinese not think well of themselves! For more than four thousand years their history has been in the making. Their civilization has kept the even tenor of its way, while the glory of Babylon, Egypt, Rome, and Greece has blazed brilliantly for a time only to be quenched by some rival.

The Chinese of long ago were developing a

literature long before our ancestors had ceased to live in caves. They were dressed in silks and satins and were selling such raiment to the Romans when our forebears were wearing the skins of wild beasts. The printing-press was in use in China many centuries before it was invented in Europe. Gunpowder was manufactured there first, and in the fourth century the mariner's compass was produced.

In the early part of the nineteenth century, the Chinese wall of conservatism and conceit was still standing and left no gates unlocked for the admission of anything new or foreign. There was no crevice in which a seed of modern life could lodge and germinate. To-day the wall is crumbling, and many gates are wide open for the admission of the new, the true, and the strange.

In the days when foreigners were given scant welcome to China, the first medical missionary to that unfriendly country, Dr. Peter Parker, landed at Canton and immediately began to open the eyes of the blind and to cure the sick. In time, patients from every one of the eighteen provinces of China were treated in his hospital at Canton, and men of every rank received a new impression of the "foreign devils." The eyes of the Chinese were being opened in more ways than one. Men of influence came into personal touch with an unselfish

fellow-man of a different race, whose disinterested service amazed them and caused them to ask in whose name and by what power he was living such a life. Thus it is said that Peter Parker, " with the point of his lancet," opened China. Certain it is that Dr. Parker was largely responsible for the opening of China to missionaries, and he must be counted among those who did much to foster friendship between the Orient and the Occident.

Sturdy old New England has produced many of the finest characters in American history. This was true not only for statesmen, men of letters, social reformers, and warriors, but for religious leaders as well. John Eliot preached his first sermon to the Indians in Newton, Massachusetts; David Brainerd, another apostle to the American Indians, was born and reared in Connecticut, and it is said that William Carey was led to give his life to the non-Christian world through reading the journal of David Brainerd. The first foreign missionary to sail from America, Adoniram Judson, was a son of Massachusetts. And in the quiet village of Framingham, Massachusetts, Peter Parker was born, June 18, 1804.

The parents of Peter Parker were farmer folk in moderate circumstances. Religiously, they were strict members of the Orthodox church of Framingham. Both in and out of his home, Peter Parker

was under austere religious influences, and the teaching which called attention particularly to the sterner aspects of Christianity helped to develop an almost morbid seriousness. Upon joining the church he took a serious view of his obligations. He began to ask himself what use he should make of his life. He thought of work among the Indians, since a college education seemed entirely beyond his reach, on account of the family's circumstances. One day, however, a friend suggested means whereby he might secure educational advantages of which he had not dared to think. His father was alarmed at the suggestion. While he would have been glad to give Peter a good education, he did not believe it was possible for the family to spare the boy's practical assistance, and he tried to dissuade him from his purpose. Peter generously assured his parents that he would not leave them unprovided for; and although the ministry appealed to him strongly, he urged the matter no more for some time. For these years of waiting his text was, "I will get me up upon the watchtower, and see what the Lord will say unto me."

Gradually the obstacles were removed. The father's long illness exhausted his savings, and there were family debts to be paid. The situation called for every dollar that Peter could earn until he was twenty-one years of age. Happily, an arrangement

was made in the winter of 1825-26 whereby the father's estate was settled upon a son-in-law, on condition that the parents should be supported the remainder of their lives in a definitely prescribed way and the debts paid. This left Peter free to enter Wrentham Academy, about twenty-five miles from his home, with $115 secured from his father's estate, and a recommendation from the pastor of his church to the principal of the academy. By the autumn of 1827 he was a student at Amherst College, where he really began his missionary work by visiting the poor in the almshouse and even convicts in prison. When the cholera appeared, he visited the sufferers and did all he could for their comfort.

Peter Parker spent his senior college year at Yale, where the amount of work which he managed to crowd into the days "verged closely on the marvelous." Poverty, sickness, disappointment, and hardship pressed him, but he allowed nothing to stand in the way of his purpose to excel. During his year at Yale, occurred the revival of religion in that institution, due largely to the personal efforts and influence of Peter Parker. The question of the use to be made of his own life was constantly with him, and before his senior year had ended he had decided to become a foreign missionary. He returned to New Haven the next year for theolog-

ical studies, in time offering his services to the American Board of Commissioners for Foreign Missions, preferably in China.

After taking both theological and medical courses at Yale, at the age of thirty, he was appointed a missionary by the American Board. In June he accepted the invitation of a Mr. Olyphant to sail with him, in his own ship, *Morrison,* to China. Of course there were people in those days who said it was a pity for a man with Dr. Parker's training "to throw himself away on the heathen," but the choice had been made carefully and with deliberation.

He did not wait until he reached China in order to begin work. On the long voyage he held services for the passengers, he interested the sailors in getting up concerts for the benefit of missions, and he organized a Bible class, besides employing his medical skill for more than twenty persons on the ship.

After nearly five months at sea, Dr. Parker reached Canton, that great city whose teeming population and strong cross currents of life must have given him a good idea of the vastness of his missionary task. He tarried here two months—just long enough to receive some strong impressions of the need of medical work—before he sailed for Singapore, where he could secure larger freedom from interruption while studying the language. He

also found time to do considerable medical work there also. A year later he was back at Canton, beginning his great work with the opening of the Ophthalmic Hospital in November, 1835. It was decided to offer treatment for diseases of the eye, since they were the most prevalent disorders in China and the most baffling to the native physicians. Very soon this class of diseases offered far more work than one man alone could perform.

On the day the hospital was opened, one person only, a poor woman, applied for treatment. Three months later Dr. Parker was prescribing for a hundred or more every day; and they were from all classes,—from penniless beggars to officials of the Imperial government. Some of the sufferers would rise at midnight in order to secure good places in line at the gateway; others would sleep on their mats spread near the doors, so as to be among those admitted first in the morning. The Chinese had never before heard of such wonderful cures. And as he employed his medical skill, he told his patients of the Great Physician who was the healer of their souls and the giver of eternal life. In China he exercised the same zeal in religious work that had distinguished him as a student in Yale.

The prejudices of the Chinese were not easily overcome. The people considered the foreign doctor's work miraculous, but they could not under-

stand his unselfish service. His motives were questioned. What could be the object of a foreigner living among them and wearing himself out in efforts to heal their diseases? Surely, they argued, he had some personal ends to serve! But Dr. Parker continued his Christ-like labors until many came to believe in him, and in two years he was one of the best known foreigners in China. A few English, American, and Chinese business men, who had questioned the wisdom of medical missionary work, were converted to a belief in its extraordinary usefulness and subscribed generously for its support. All this counted, too, in favor of missionaries in general, who were continually hindered by China's unfriendly attitude to new teachings of any kind. Did not the doctrines of Confucius antedate those of Jesus? Did not their history begin long before David ever wrote a psalm? Was it not impertinence for missionaries from an infant nation like America to presume to instruct China, with its four thousand years of recorded history?

In 1838, at a largely attended public meeting in Canton, the Medical Missionary Society in China was founded. The chairman of the meeting was Dr. W. Jardine, the founder of a great mercantile house, Jardine, Matheson & Co., whose numerous ships are so well known in Chinese waters. In organizing the society, a leading part was taken by

Dr. Parker, whose successful work for more than two years had been the inspiration of the movement. In 1841, the Chief Superintendent of British Trade said of the society, "The surgeon's knife was better calculated to conciliate the Chinese than any weapon of war."

The society continues to this day, now under the name of the Canton Medical Missionary Society, and claims the distinction of being the oldest organization of its kind in the world. The Ophthalmic Hospital continues under the name "Canton Hospital," and prides itself on being the oldest hospital in the Orient. It is striving to develop a strong medical college. Dr. Parker trained several young men to a point of large usefulness as physicians, despite his arduous labors with the blind and sick, his lack of assistance, and his simple equipment.

In June, 1840, the hospital was closed on account of the blockade of Canton by the British, in the Opium War, which constitutes one of the sad chapters in the story of the treatment of Oriental peoples by white races. Whatever justification the British may have claimed for their course, the forcing on the Chinese people of opium grown in India has caused an incalculable weight of woe, physically and morally. Dr. Parker did all in his power to prevent a clash between Chinese and

British, but in vain. Naturally, the feeling among the Chinese was bitter against all foreigners, who felt that they were in constant danger. The Imperial Commissioner of the Chinese Government had determined to put an instant stop to opium traffic. Concerning the Commissioner's course, Dr. Parker wrote his sister, on March 25, 1839, the following letter which foreshadowed serious trouble:

"In this he is right, but his terms are arbitrary, and, in a sense, impossible. He has threatened the life and property of natives and foreigners alike, if the whole amount of opium is not given up. The merchants say it is not theirs and they cannot give it up, but they will cease themselves to have anything more to do with it. On Wednesday last he began his measures of intimidation. No more foreigners were allowed to leave Canton. Ships under dispatch were detained; hong merchants were degraded, chains put about their necks, and decapitation threatened. Last evening, at half-past six o'clock, or thereabouts, Captain Elliot, Her Majesty's Chief Superintendent of British Trade, having heard that we were under restraint in Canton, and not knowing what we might be suffering, forced his way up from Macao, and in full uniform, with sword in hand, reached Canton, daring the mandarins who pursued him to fall upon him. He

immediately hoisted the British flag, and called upon all Her Majesty's subjects to stand by him. There is real danger; war itself may yet be waged between the two nations; but I hope not and pray not. Captain Elliot is willing to do all in his power to suppress the wicked traffic, but requires it should be done justly; and all the merchants have signed a pledge not to continue it."

The hospital having been closed on account of the trouble over the importation of opium, and conditions making it impossible for him to resume his work at that time, Dr. Parker returned to America for a furlough. After seven years of hard work he needed a vacation that was to prove notable in several ways. He was warmly received in America, where large audiences heard with deep interest the story of his work in Canton. He did much to lead public men in Washington, including President Van Buren, to recognize the importance of establishing diplomatic relations with China. He organized groups of people in America to support the medical work. He journeyed to England and the continent of Europe to make friends for the same purpose. And in Washington he met the lady who was to become his wife.

A few weeks after reaching America, Dr. Parker left New Haven for Washington, "to call the attention of the men in power to the relations of

America to China." Immediately upon reaching the capital, he attended the levee of the Spanish minister where he met several foreign representatives, as well as Daniel Webster and other American statesmen. Next day he called upon President Van Buren. Daniel Webster requested him to submit in writing his views regarding the necessity for the appointment of a minister to China. His written statement pointed out that, in addition to the need for closer relations between China and America, there were other important ends which might be served. He believed that if a Minister Plenipotentiary were sent immediately, he might serve as a mediator between the English and the Chinese in the Opium War. But he was moved largely by the fear that, unless something were done at once, China, moved by the old anti-foreign spirit, intensified by difficulties with the British, might drive out all foreigners and refuse communication with the outside world, as Japan had done. That would have been a calamity for the Chinese themselves.

That Japan's isolation was not a myth, Dr. Parker had discovered, for several years earlier, when he and others attempted, in the good ship *Morrison*, to take back to their own country seven shipwrecked Japanese, they were completely foiled. At no port were they allowed to send off a skiff manned even with Japanese; and wherever the at-

tempt was made, cannon on shore opened fire on the ship. Dr. Parker did not wish to have China follow the example of Japan. On that point he wrote to the Secretary of State:

"There is serious ground of apprehension that, if the subject is not seasonably attended to, all foreign intercourse will be cut off, and China will act after the policy of Japan.

"Even now this is the wish of one of the two great factions into which the Chinese Government is divided. [illegible] The foreign residences in Canton have been enclosed by a row of palisades in the river, forming a semicircle, and extending some distance above and below them. The area in front is enclosed by a high fence, and gates extend across the streets, so that in five minutes, at any time, the foreigners may be made prisoners in their own houses.

"Privileges of going abroad upon the river and in the suburbs and neighboring villages for air and exercise, formerly enjoyed, are now prohibited. Though the commerce is desired, and thousands and tens of thousands of silk manufacturers and tea cultivators depend upon it, yet as the lesser of two evils, the government may, with one decisive stroke, cut off all foreign intercourse."

Dr. Parker came in closer communication with the law-makers. The second Sunday he was in

Washington, upon the invitation of the chaplain to Congress, he preached in the Capitol to an audience composed largely of members of the Senate and House of Representatives. His text was Acts 14:26: "And thence they sailed to Antioch, from whence they had been committed to the grace of God for the work which they fulfilled. And when they were come, and had gathered the church together, they rehearsed all things that God had done with them, and that he had opened a door of faith unto the Gentiles."

Much of the sermon was devoted to a description of the work at the hospital where, in less than five years, about eight thousand Chinese patients had been received, besides Americans, English, French, Spanish and Portuguese, East Indians, Malays, and Japanese. He told of the organization of the Medical Missionary Society, and he drew illustrations from his personal experiences. To mention one:

"When the man, who had had cataracts for forty years and more, had been operated upon, stroking down his long, flowing beard, he remarked: 'I have lived till my beard has become long and hoary, but never before have I seen or heard of one who does such things as are done in this hospital.' Then an opportunity came to tell him the story of Jesus, and that but for Him I had not come to China. When I have visited patients at their houses, others in the

neighborhood who had been cured have often met me, and told to multitudes what had been done for them. With minds thus favorably disposed, I have spoken to them of Christ and the gospel; and they go away to repeat to others what they have heard." This sermon must have been very different from the usual discourse before Congress.

While in Washington, trying to rouse interest in China and to enlist the attention of statesmen, he met Miss Harriet Webster, who was related to the families of Daniel Webster and Rufus Choate. Dr. Parker was a man of singularly attractive personality, and it is not surprising that, in a few weeks, he had completely won the heart of the lovely Miss Webster. Her beauty and her family connections had opened wide the door of Washington social circles in which she was very popular.

Of his engagement Dr. Parker wrote to a friend, "I am more and more confirmed in the wisdom and happiness of my choice, and the obligation we are under to God. She is the desire of my heart."

To his sisters he wrote of Miss Webster with a little more old-time formality:

"In the ardent and reciprocated affection of Miss Harriet C. Webster of Washington, I have the desire of my heart and one whom it will be my pleasure to introduce to you in time as your new and loving and beloved sister. Were I to express to

you my opinion of her, you might think me biased in judgment; suffice it to say, then, in the language of others, that 'she is the best young lady in the world' and that there is not another in Washington in whom there is more general interest felt."

A little later he and Miss Webster were married. The union was a happy one, and Dr. Parker frequently expressed his gratitude for the blessings his wife had brought into his life. Nineteen days after the wedding Dr. Parker sailed alone for Europe, hoping to secure funds for medical work in China, leaving his wife in America, during his absence of four months. It seems that Mrs. Parker wished to spend some weeks with her widowed mother, who lived in Augusta, Maine, before leaving on the long voyage for the strange and distant country where they lived for nearly fifteen years before returning to the United States.

Dr. Parker's visit to Europe was crowded with work for he was trying to rouse a real interest in Chinese missions. In England, Sir Henry Halford and Sir Risdon Bennett at once gave the subject hearty support. The Duke of Sussex, Princess Sophia, the Archbishop of Canterbury, the Duke of Wellington, Sir Robert Peel, and other distinguished persons gave the work their commendation. Visits were made to France and Germany. The total amount subscribed by friends during his visit to

Europe and America (he visited numerous cities here) was $6,702.64, of which $672.01 was expended in traveling, printing, and in the purchase of supplies for the hospital. The remainder was forwarded to China. Here was the work of a pioneer. The amount he received in money seems small indeed in comparison with the large amounts that are given to-day for medical missions, but at that time he was educating the people on a subject of which they knew little.

In June, 1842, Dr. and Mrs. Parker sailed for China. The months since the return from Europe had been spent chiefly in Philadelphia and Washington. In the former city he attended lectures at the University of Pennsylvania; in Washington he continued his efforts to induce the government to send a minister to China. Interviews with another President—President Tyler—and Daniel Webster were memorable features of his activity; but he finally sailed from America without having secured the desired action by the government. However, this came a little later, and he was called on by the United States Government to have a large part in the execution of its plans.

The arrival of the "foreign lady" at Canton was the occasion of considerable excitement. Government officials inquired as to her purpose; whether she was to remain permanently or merely

to make a visit. The messenger appeared satisfied when informed that it was not Mrs. Parker's purpose to venture into the streets for a time, but to remain very quiet, securing her exercise by walking inside the enclosure in the evening.

Hospital work was resumed in the old building, and the years immediately following were crowded with labors and anxieties. The Opium War had ended, but the Chinese still entertained bitter feelings toward the English, which occasionally included all foreigners. Nevertheless, the Chinese flocked to the hospital. From November 21, 1842, to December 31, 1843, more than 3,500 patients applied for treatment. At the same time, Dr. Parker was training Chinese young men in Western medicine and was preaching frequently. He had not lost his evangelistic zeal. The volume of work at the hospital continued large, year after year. He wrote, "As in former periods, so of late, persons of all conditions and ranks, from the beggar to the highest functionary under the Imperial government, have alike availed themselves of the hospital's aid."

In the autumn of 1843, the United States Government decided to send a commissioner to China, to negotiate a treaty between the two countries. For this important post the Hon. Caleb Cushing, of Massachusetts, was chosen. Immediately upon

reaching China, Mr. Cushing requested Dr. Parker's assistance as Chinese Secretary to the Mission. Dr. Parker could hardly decline to give his help in a work for which he had done such earnest pleading at Washington; and perhaps no man in China could have done more to help win the Chinese, in the face of an indifference to foreign governments that amounted almost to scorn or insult. Of this important service, Dr. Parker says little in his journal. A treaty was made which was ratified by the Emperor on August 4, 1845. Dr. Parker labored on as a medical missionary while serving as Chinese Secretary to the Mission.

Late in 1844, Dr. Parker received notice of his appointment by the President of the United States as Secretary and Chinese Interpreter to the Legation in China. A United States Legation in China had been one of Dr. Parker's dreams, and he had done much to secure a treaty making the Legation possible. He accepted the appointment, after inquiring whether it would be compatible with his missionary labors. The news of his appointment was welcomed by leading Chinese, among whom his influence was so great that a little later he was largely instrumental in quelling a riot in Canton, in which the lives and properties of both English and Americans were imperiled.

Upon the death, in 1847, of the Hon. Alexander

H. Everett, Commissioner from the United States to the Chinese Empire, Dr. Parker was given entire charge of the Legation until a successor to Mr. Everett could be appointed. With all the affairs of the Legation depending on him, in addition to his duties at the hospital, and preaching often on Sunday, Dr. Parker was nearing a physical collapse. Soon he was ill with fever, but from this he rallied with the return of cool weather. In 1853, while on government service, he was shipwrecked and suffered from exposure. In January, 1855, he was again at Canton in charge of the Legation. But poor health compelled him to return to America with Mrs. Parker a few months later. Perfect rest at sea restored his health to such an extent that he reached America in fairly good physical condition.

Affairs in China appeared to grow more complicated month by month, and desiring the very best man who could be secured, President Franklin Pierce asked Dr. Parker to accept the appointment of commissioner and Minister Plenipotentiary to China, for the purpose of revising the treaty of 1844 which he had helped to make. Having recovered his health to such an extent that he felt he might safely return to China for a time, he accepted the appointment. His first official act was to strike a blow against the trade in Chinese coolies, many of whom were sold into slavery; and he secured

religious liberty for all Chinese or others, who should peaceably teach or practise Christianity. The actual revision of the treaty, the great object of his return to China, was not accomplished until the year after he resigned as Commissioner, but the result was almost entirely due to Dr. Parker's efforts.

Feeling that he had done everything in his power as Commissioner, he resigned that office and returned to America in August, 1857, where his life was crowded with activities of many kinds, and where numerous honors were conferred on him. His health had been so affected by a sunstroke in China that it was unwise to attempt missionary work again, although he was ever interested in the cause to which he had offered his life; and in his own country he found numerous opportunities for work and for helpful suggestions of far-reaching influence.

On January 10, 1888, this great man finished his work on earth. He had rendered service such as is permitted to few men of any generation. The many fine hospitals in China to-day prove that his work was not in vain. He had served the King in serving men of a different race, and in sharing with them the revelation of God which he had found in Christ.

One writer has said, with true insight, that "we

have not as yet fully comprehended the nature and the magnitude of the services Dr. Peter Parker rendered both to China and to the United States; while the triumphs won by him, and through his work by others, for the kingdom of Christ, only the cycles of eternity can reveal."

VIII

JOHN KENNETH MACKENZIE

VIII

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WHEN the nineteenth century had run just half of its course, there was born in England a boy who was not destined for a long life; but his short life was crowded with work of the most unselfish kind. He was to work and struggle toward a beautiful and noble ideal; and though he died before he had reached the meridian of his life, he left behind him a splendid record and an inspiring example.

This man was John Kenneth Mackenzie. He was the son of Alexander and Margaret Mackenzie, and was born in Yarmouth, England, August 25, 1850, though his parents moved to Bristol while he was still very young; and in Bristol his boyhood and youth were spent.

His first serious religious impressions were received when he heard Dwight L. Moody, at the time of the latter's first visit to England, in 1867. A year later, he decided that his path in life should be that which was marked out by Christ, in whose footsteps he pledged himself to follow.

Having made the decision deliberately, he was not satisfied with any halfway discipleship. Ragged-school work, visiting the poor in lodging-houses, and holding open-air services were forms of activity in which he engaged. He worked and prayed for the most depraved men and women, one of the men being a notorious burglar known as "the king of thieves" who professed conversion. Young Mackenzie joined older persons in Midnight Mission work, in which men and women from the public houses were sought, in the hope of reforming them. These were, of course, a degraded and debased class, but in his eagerness to do work for Christ, the young man had courage to undertake the most difficult tasks.

In some way, his attention had been drawn to China, and after reading a small volume, "The Double Cure, or What is a Medical Mission?" he decided that he would give up a business career and undertake the study of medicine, with a view of going to China as a medical missionary. At first his parents would not consent to so radical a change in his plans. Some friends, hearing of the obstacle in the young man's path, agreed to meet together one evening, to pray for its removal. Upon returning home, a few hours later, John Kenneth found his father and mother quite reconciled to his desire to spend his life in China. In October, 1870, he

entered the Bristol Medical School, and in four years he was graduated. Later, he attended the Royal Ophthalmic Hospital in London. The day he passed his final examinations, his eye fell on a notice, in a missionary magazine, of a vacancy in the hospital at Hankow, China, which had been opened by the London Missionary Society. In a few weeks he found himself under appointment to that hospital.

Hankow, at the junction of the Yangtse and Han rivers, six hundred miles from the sea, is the throbbing metropolis of Central China. No one who ever visited this commanding commercial center could fail to appreciate its strategic location. Sea-going vessels sail up the river as far as Hankow, to load with tea for England, Europe, and America. Smaller steamers go another four hundred miles up-stream to Ichang, while still smaller vessels begin another lap of four hundred miles, against a terrific current and through deep gorges, to Chung-king, in far-away West China, close to Tibet. Chinese junks, from up and down the great river, and from far up the Han, make a veritable forest of masts, fringing the banks of both streams. The scene is one that thrills, and it would appeal to the imagination of any one interested in selecting a field for missionary effort. When Dr. Mackenzie reached Hankow, in June, 1875, several other soci-

eties besides the London Mission were at work in Hankow center. He was greatly pleased at the spirit of unity prevailing among the missionaries of the several bodies. Of one of the monthly union prayer-meetings he wrote: "Had a most delightful meeting of missionaries in Mr. Scarborough's house. The subject of a fuller trust in Christ for missionaries and converts was brought up. The Lord's presence was very manifest. I am sure we all felt it was good to be there. The spirit of union is very sweet." To-day more than one hundred and twenty-five missionaries of various denominations are working in the Hankow center. Forty years have wrought a great transformation.

Dr. Mackenzie did not find the Chinese eager to receive his religious teachings or to seek his medical aid. Even as late as 1875, and in such a center as Hankow, where foreigners and foreign institutions had been in evidence for many years, the prejudice against them was not easy to overcome. Even the small group of Chinese Christians were often slow to turn to the new medical treatment from the West, but the critical illness of an old Chinese deacon gave Dr. Mackenzie, at the beginning of his career, an opportunity to exercise his skill; though he realized keenly that the failure of the patient to recover would be a distinct blow to his prospects for immediate usefulness. In that case,

he would have been charged with hastening the deacon's death.

The foreign doctor in China, in a community where Western medicine is still strange to the masses, is frequently at his wit's end. Should he receive into his hospital a patient whose chances for recovering were very small? And should he do his best to lengthen life, although he believed there was little hope? Dr. Mackenzie knew that the death of the deacon under his care would be attributed to him, and might result in the immediate departure from the hospital of such patients as were there and well on the way to recovery. He knew, too, that others whom he might help would not consent to come to him for treatment, after the announcement of a death in his hospital. What should the perplexed doctor do?

Some five Chinese doctors, prescribing the usual Chinese remedies, had given the deacon no relief, and in desperation the family consented to call in the new medical missionary. Dr. Mackenzie thought the sick man was sinking rapidly; he considered it his duty to do all he could, although he believed the man to be dying. He recognized the possible disastrous effect on his own professional standing in the event of failure, nevertheless he decided to do all he could. Heroic remedies were employed and presently the sick man responded.

In time he recovered and confidence in the new medicine was thenceforth established among the deacon's friends.

In 1875, and for many years thereafter, Rev. Griffith John, whose name was known in missionary circles as simply Mr. John, was one of the most active and beloved preachers of the gospel in all China. He delighted in opportunities for preaching in the villages, and was eager to have the co-operation of Dr. Mackenzie in his cross-country work. In some of the villages the reputation of the foreign doctor had preceded him, and a few patients awaited him. In other regions, hatred of the "foreign devils" was so intense that the lives of the two earnest and intrepid missionaries were actually endangered.

In at least one of the country tours, Mr. John and Dr. Mackenzie narrowly escaped with their lives. The people met them shouting, "Go back to Hankow and preach your Jesus there; you shall not come here." Soon the crowd began to pelt the missionaries' heads with hard clods of earth, and quickly an infuriated mob of more than a thousand angry men, determined on mischief, surrounded the two foreigners. Although they suffered some injury, both men finally reached the home of a Chinese Christian, who gave them refuge and refreshment, despite the risk which he incurred for himself

and his family by receiving the "foreign devils." In these later days, when the Chinese have assumed a friendly attitude towards missionaries, it is well to recall the hardships of the pioneers. It is well to remember, too, when the believers were sometimes called in derision "rice Christians," that there were intrepid and loyal Chinese disciples, even in early days, who risked their own lives to protect the foreign messengers of the gospel.

The young medical missionary soon discovered that blindness, total or partial, afflicted so large a proportion of the people of China that he could profitably spend all of his time in treating such cases, to many of whom sight might be restored through simple operations. However, he gave himself to general practise, and, as far as possible, attempted to relieve suffering in any form. When the dreaded cholera appeared, he did what he could for those who were stricken, as well as suggested measures to stop the progress of the plague. Then there was always before him the visible evidence of opium's baneful effects on the Chinese. When it was known around Hankow that the Mission hospital offered hope to those who were enslaved by the drug, they came in such numbers that it was difficult to find places for them to sleep.

Dr. Mackenzie had sailed for China in 1875, unmarried, believing that, as a bachelor, he would give

more time the first year or two to language study, and wishing to try the climate before undertaking the responsibility of marrying. Griffith John had strongly advised such a course. But as time went on, his thoughts turned often to the English girl, Millicent Travers, to whom he was betrothed in Bristol before he sailed for his distant field of labor. In Bristol they both had been engaged in Christian work, and Dr. Mackenzie felt that, after two years' study of the Chinese people and their difficult language, he was justified in establishing a home of his own; so he wrote to Miss Travers and asked her to join him in his distant field of work. This she agreed to do.

In December, 1876, he journeyed to Shanghai to meet Miss Travers, who arrived early in January. On the 9th of that month they were married and left at once for their station in Hankow.

Mrs. Mackenzie proved a real helpmeet to her husband, taking up at once the study of Chinese which proved, of course, immediately useful. Work among the English sailors absorbed much of her time, though it did not interfere with the womanly task of home-making.

"We are now established in our pretty home," wrote Dr. Mackenzie to his brother, "and it looks both homelike and comfortable, thanks to Millie's deft fingers." At another time he wrote, "What

a joy it is to have a dear wife to look after you! Millie is a splendid housekeeper, and makes the house and surroundings look as pretty as any in the place."

Meanwhile the doctor's work pressed him hard. During the year 1877, more than a thousand patients were treated in the hospital, and nearly twelve thousand received medicine and advice at the dispensary. At that time he wrote his mother: "The hospital is flourishing more than ever; one thousand and fifteen out-patients one day, and ninety-four the next, all to be seen and to be attended to pretty well by myself. The in-patients, too, are very numerous; we have forty-two beds, but they are full, and many lying on the floor; I am having new beds made. Many of the people come from long distances; twenty arrived in one day from the same town." Although his medical work made such heavy demands on his time and strength, he never lost his appreciation of the importance of personal piety on his own part nor his original fervor in leading men to Christ.

Sometime in 1878 circumstances arose which caused Dr. and Mrs. Mackenzie to desire a change of field. The necessity for making a change appears to have given them great pain, but, as is usually true when earnest souls accept in faith and courage the upheavals in their lives, or a reversal

of their plans, in time they came to see that a greater work was awaiting them elsewhere. The later years of Dr. Mackenzie's life were saddened by the serious failure of his wife's health; and although this shadow had not then darkened their lives, the doctor could not but feel that on his wife's account a change was necessary.

Their own preference, if a change must be made, was for Chungking, in Szechuen Province, far up the Yangtse toward the borders of Tibet. But at that time the London Missionary Society did not think it safe for a missionary to go with his family to Chungking and in 1879 they were transferred to Tientsin, the port for Peking, the capital of the empire, and in other respects an exceptionally important city.

When they reached Tientsin, they found there was no appropriation for the medical work. A doctor without money to buy drugs! The Mission adopted a resolution requesting the Society to grant money for medicines, but in those days, before the Trans-Siberian Railroad reduced the time for mail between Tientsin and England, no less than five months were required to write to the Board and receive an answer. In his disappointment, Dr. Mackenzie resorted to prayer and invited his colleagues to join him in praying for the needed relief. It was suggested by one of the missionaries that a

petition be presented to the Viceroy, setting forth the advantages of establishing a hospital for the benefit of the Chinese, and soliciting his assistance. The memorial, which set forth the neglected state of the city and the prevalence of sickness, was presented directly to the Viceroy of Chihli Province, who was none other than Li Hung Chang, sometimes called "the Bismarck of Asia." This well known man was one of the ablest Chinese statesmen of modern times. Earlier, he had joined "Chinese" Gordon in opposing the Tai-ping rebellion against the Tartar rule. Later, he was Senior Grand Secretary of State, continuing to be the intermediary between China and the world at large until the war with Japan in 1894. He was Prime Minister of China from 1895 to 1898.

The petition to the Viceroy was received by him with expressions of commendation and a promise to consider it. However, two months passed without further word from him. A few foreign drugs had been secured from Shanghai, and Dr. Mackenzie was attempting to help the people, but only a few came to the dispensary. The Chinese of Tientsin were known as especially anti-foreign. However, the period when they were unwilling to accept his help was used profitably by Dr. Mackenzie in acquainting himself with the differences in the Hankow and Tientsin dialects. While waiting,

there came a call for service which the missionary considered as a direct answer to prayer.

On August 1, the day for the weekly prayer-meeting for missionaries and Chinese, when the subject was "Ask and it shall be given you," and the medical needs of the Mission were included in the petitions, a member of the British Legation at Tientsin was closeted with the Viceroy. The Englishman, observing that Li Hung Chang seemed very sad, ventured to inquire as to the cause. "My wife is seriously ill—dying; the doctors have told me this morning she cannot live," replied the statesman. "Well," said the Englishman, "why don't you get help from the foreign doctors in Tientsin? They might be able to do something even yet." The Viceroy remarked that it would be impossible for a Chinese lady of rank to be attended by a foreign physician. In time, however, Li Hung Chang determined to break with thousands of years of tradition, and to call in Dr. Mackenzie and Dr. Irwin to treat Lady Li. Just as the prayer-meeting was breaking up, the messenger arrived.

Three years earlier, in Hankow, Dr. Mackenzie had been asked to treat a sick woman, but he was compelled to make a hole in a curtain around the patient's bed, through which her arm was protruded, that he might examine her pulse and diagnose the illness. In the case of Lady Li, permission was

given to examine and question the patient. For six days the two physicians were in close attendance before she was apparently out of danger. For complete restoration of health, it was necessary to adopt a course of treatment which, according to Chinese custom, could be administered by a woman only, so a certain Miss Howard, who was a physician and a member of the Methodist Episcopal Mission at Peking, was invited to take up her residence, for a time, in apartments especially prepared for her in the Chinese palace.

The service rendered to Lady Li was important in itself. It was of very great value, also, to the cause of Christian missions. It helped to open doors that had been locked to foreigners. The daily visits of the physicians to the palace became known to the populace, and the recovery of the Viceroy's wife was cited widely by the Chinese as evidence of the foreign doctors' extraordinary ability. Very soon Dr. Mackenzie and Dr. Irwin were besieged by patients. Of the impression made on the people, Dr. Mackenzie wrote: "It was a truly strange gathering we found daily collected round the outer gates—the halt, the blind, and the deaf were all there, waiting to be healed; indeed, that whole city seemed to be moved. High officials sought introductions to us through the Viceroy himself." One day the Viceroy consented to wit-

ness several operations which were performed in the court, in front of his audience chamber. He and lesser officials, with their attendants, looked on while various operations were performed, without pain, to patients under the influence of chloroform. The effect on the Viceroy was immediate and marked. He knew there were multitudes needing treatment. He knew, too, that Chinese physicians could not accomplish what he had seen done by foreigners. He was so deeply impressed that he arranged immediately for a room, just outside his official residence, to be placed at the disposal of Dr. Mackenzie as a dispensary; and when it became evident that a single room would not suffice, he set apart an entire quadrangle in one of the finest temples in the city, placing over the entrance his three official titles and the words "Free Hospital." At the same time, he made a contribution of two hundred taels [1] for the purchase of medicines, and gave commissions to the medical missionaries to attend his family at his official residence, as well as to conduct the free hospital at the temple. The entire cost of the conduct of the hospital, not including the missionary's salary which was paid by his Society, was defrayed by the Viceroy. Dr. Howard, who had attended Lady Li, was transferred from Peking to Tientsin, where she and her assistants took com-

[1] A tael is a Chinese coin worth about 68 cents.

plete charge of the department for women, in the medical work at the temple.

Although a great work was done at the dispensary, as many as two hundred and fifty persons sometimes waiting in front of the doors for treatment, Dr. Mackenzie felt the need of a properly equipped hospital; and wealthy patients, who had been treated at the dispensary, were ready to help. A certain general who had been treated at a hotel subscribed five hundred taels, and the Prefect of the city gave three hundred, while another official contributed a thousand. When the Viceroy heard of the movement, he authorized a public appeal for funds, and he himself offered to give a thousand taels. Grateful patients alone contributed sufficient money to clear the ground on the Mission compound and to complete one ward. The hospital was erected in the best style of Chinese architecture, and when it was opened, the public exercises were attended by Chinese officials and foreign diplomats. It was supported entirely from native sources.

The Viceroy was much interested in what he had heard regarding vaccination as a protection against the ravages of smallpox. He sent for Dr. Mackenzie to vaccinate his little son, and he suggested that the medical missionary establish a vaccine department to help, in a large way, to safeguard the lives of the Chinese. In the pressure of many duties

that had come to him, where at first nearly all doors seemed closed, Dr. Mackenzie wrote to one of his friends, "The work now is only limited to one's strength and capacity. May God give us strength in our great weakness."

In the midst of his successful work at the hospital, when all indications pointed to war between China and Russia, Dr. Mackenzie met two Englishmen of distinction at Tientsin. One was Sir Thomas Wade, British Minister, to whom Li Hung Chang gave a banquet. Six foreigners (among them Dr. Irwin and Dr. Mackenzie) and eight Chinese were invited. At the banquet, the Viceroy spoke to his guest most appreciatively of the medical missionary work, which was an extraordinary occurrence at a time when the motives of all missionaries were usually misunderstood. The other distinguished Englishman was General Charles George Gordon. His command, in 1863, of the Chinese force known as the "Ever Victorious Army," against the Tai-ping rebellion, which was put down in thirty-three engagements, led to his being known in history as "Chinese Gordon." Dr. Mackenzie was especially pleased with General Gordon, then in China acting as adviser to the Government in its relations with Russia. General Gordon was a sincere Christian, and Dr. Mackenzie characterized him as "a man making all love him

who came near him;" and with religion a vital part of his life, though he appeared to abominate anything approaching cant.

After the year 1880, Mrs. Mackenzie's delicate health made it impossible for her to continue in China, and she returned to England with her little daughter. In 1882 they went back to China, but it seemed clear that Mrs. Mackenzie could not endure the climate of that country. The doctor, with a sad heart, took his wife to London, where he remained five months on the only furlough of his missionary career. In July, 1883, he set sail for China. The last four and a half years of service for China were given at great cost to the entire family, but so much appeared to depend on the doctor's continuance at his post, that they accepted the sacrifice involved.

One of his most significant achievements was the establishment, at Tientsin, of a small medical college which had the support of the Government. Some years earlier, a number of promising lads, ten or twelve years of age, from good families, had been sent to America for education in medicine. As there were few facilities in China for teaching these young men the branches which must be studied in advance of a medical course, they were necessarily in America so long, during the formative period of their lives, that they departed from

Chinese customs and modes of thought. After ten years abroad, when the most advanced students were only halfway through a regular college course, they were called back to China. It is now customary to have Chinese students complete a college course in their own land before going abroad for professional training, and the results are encouraging.

When Dr. Mackenzie heard of the return of these students, he requested the Viceroy to place eight of them in his charge, for the study of medicine and surgery for use in Government service. The proposal was accepted promptly, and the first Government medical school in China was opened in December, 1881. Dr. Atterbury of Peking, and many of the medical officers of English and American naval detachments at Tientsin, cheerfully assisted in the medical work. At times, however, the missionary was a "whole medical faculty in himself." In October, 1884, six students received diplomas. By 1887, nineteen young men had completed the medical course.

It is regrettable that more cannot be said regarding the numerous activities of this remarkably useful man. The establishment of a hospital for foundlings (a feature of the organization of the China Medical Missionary Association), his work in the country around Tientsin, his love for the

Bible, his belief in prayer, and his growth in grace, in the years immediately before his death, in 1888, are topics of deep interest. But a man who was "a whole medical faculty in himself" had no time to recount his achievements in journals or letters. Moreover, the making of such a record was wholly at variance with the character of the man. There was work to do, and he did it. The motto of his life seems to have been based on this fact.

Dr. John Kenneth Mackenzie had achieved a notable success before he passed away, at thirty-seven years of age. At the time of his death, his life appeared to have ended abruptly. But now it is easy for his friends to discover a symmetry and completeness in his work, although his activity ceased at an age when most men are but beginning to see clearly the meaning of life.

In thirteen years of active service, he did much to overcome the deep prejudice of the conservative and self-satisfied Chinese against Western medicine. He was permitted, too, to treat successfully multitudes of suffering persons, to establish a hospital that was supported chiefly by prominent Chinese, to found and conduct the first medical school with Government support in the Chinese Empire, and to tell many of his patients of the Great Physician.

Late in March, 1888, the busy missionary con-

tracted a severe cold, and with his powers of resistance lowered, through the severe strain in body, mind, and heart, fever set in, and the good man entered into rest and reward on Easter Day, April 1, 1888.

Much of the interest of the Chinese in the medical work at Tientsin ceased with Dr. Mackenzie's death. But he had helped to lay the foundations of that which we find in China to-day, where great medical schools are being established, and where Chinese physicians are demonstrating their ability and their readiness to serve in the spirit of Christ, as they minister to their own people. In the days that have passed since Dr. Mackenzie encountered the strong Chinese prejudice against Western medicine, a great change has come over the land where, as a pioneer, he did notable work in laying foundations upon which a large superstructure is now in process of erection. Indeed, much of the superstructure is already erected.

It is not strange, now, to find trained Chinese physicians in charge of hospitals. At Kiukiang, on the banks of the Yangtse River, only a few hours' sail from Hankow, where Dr. Mackenzie began his missionary career, may be found a thoroughly modern hospital, conducted by the well known Christian Chinese woman, Dr. Mary Stone, and her large staff of well-trained assistants and

nurses. This single hospital, including its dispensary, gives almost 25,000 treatments during a single year to the suffering people in its vicinity. Occasionally, its capable and successful superintendent leaves the hospital entirely in the hands of other Chinese women, while she comes to America for special study. In missionary institutions, many Chinese physicians are associated with medical missionaries, while the number of institutions established by the Chinese, independent of foreign help, increases steadily. Recently a central hospital at Peking has been opened, with three resident Chinese physicians, graduates of medical colleges in China and Japan, and seven visiting physicians. The building was erected at a cost of more than $250,000, and the work is maintained at an expenditure of $4,000 a month. As soon as the hospital was opened, patients came at the rate of a thousand a month, but as only small fees were charged, the income was inconsiderable. It is a fine tribute to public-spirited Chinese physicians at Peking, and their generous supporters, that such an institution, without connection with any religious organization, is being conducted on such a large scale and so successfully.

While the foreigner may be said to have led the way in most of the modern medical movements in China, to-day there are numerous Chinese who are

deeply interested in whatever pertains to the health of the people. The Red Cross is well known in many sections, especially by reason of the splendid service rendered under the leadership of medical missionaries in the revolution of 1911, and in subsequent political upheavals, when thousands of wounded soldiers were cared for in a field hospital or in mission compounds. After a severe engagement, in one of the recent revolutions in Szechuen Province, as many as twelve hundred wounded soldiers received attention in the hospital and other buildings of a single mission. The example set by medical missionaries is being followed by the Chinese themselves.

There is a growing interest in public health education. The National Medical Association in China and the China Medical Missionary Association are doing their best, with the support that is given them, to conduct a nation-wide campaign against tuberculosis and other diseases, through the education of the public. Sanitation and hygiene are being taught publicly and privately. In this movement, the Chinese and the medical missionaries are cooperating cordially, and they have worked out plans, the execution of which will be an inestimable blessing to the nation, whenever friends can be found who will support it adequately.

To-day there are several medical colleges in

China in which Western medicine is being taught, some with, and others without, missionary support. At Peking and Shanghai great colleges are being established by the China Medical Board, which will endeavor to give instruction of as high grade as can be found in similar institutions in America or Europe. The China Medical Board generously recognizes the foundation-work of those pioneers who, with inadequate support, did much to prepare the way for what is now possible. It seems only a matter of a few years before the great work of ministering to the suffering millions in China will be undertaken chiefly by well-trained Chinese physicians. As the larger day dawns, it is apparent that the missionaries were the pioneers in medical work, as well as in education in the Orient, and among the pioneers must be counted the devoted and faithful worker, John Kenneth Mackenzie.

IX

THE NEVES OF KASHMIR

THE vale of Kashmir! There is enchantment in the name,—Kashmir!

"A vale of purple glens and snow-cold streams,

. . . . .

Calm lakes that bear the lotus on their breast."

Where lies this valley of legend and wondrous beauty, along whose borders

"A hundred miles of snow-clad mountain peak
On either side uprear their heads to heaven"?

If you would find it, follow the Himalaya ranges into the most northern reaches of India's borders, where in summer the high mountain passes permit adventurous travelers to cross over into other lands whose names fascinate by their suggestion of wildness and obscurity—Afghanistan, Turkestan and Tibet. These three names alone conjure up scenes of alien and barbaric charm.

In many respects this most northerly province controlled by the government of India is not unlike

Switzerland. There are fertile valleys and hillsides, watered by streams that trickle from glaciers on mountains many thousand feet higher than the Jungfrau, the Matterhorn or Mont Blanc, and just as beautiful. Not one of these great Swiss mountains is 16,000 feet high, yet hundreds of tourists visit them every year, to admire and to wonder. What would these same tourists say on visiting a great valley ninety miles long, traversed by a beautiful river, and inclosed by towering white peaks, loftier far than those of Switzerland.

From the melting snows on these great mountains come rushing, foaming torrents, icy-cold, that are in time quieted into clear rivers, or are becalmed into lakes which mirror the snow-capped peaks. In lower altitudes the shores of these lakes are glorified with borders of lotus, that lovely, large pink flower with blue-green leaves, red underneath. Wild flowers are everywhere. Red poppies fill the wheat fields in spring. Purple iris grows along the paths and on the river banks. The white and crimson anemone, the first signs of spring, are followed by yellow crocuses. Red sorrel gives color to entire hillsides. Of course the rose of Kashmir, with its peculiar perfume, is the most famous flower of the land, but the water-lily, the honeysuckle, the hazel, the hawthorn, the wild plum, the clematis, the balsam, the forget-me-not, and the columbine

must not be overlooked. And besides countless flowers, there are forests of fir and spruce and birch. Goats, sheep, buffaloes and other animals graze on the hillsides. It is indeed a land where "every prospect pleases." If man were entirely the creature of natural environment, we might expect the inhabitants of Kashmir to be a remarkable people.

Nothing is known of the aborigines of Kashmir. However, there is a written record of a succession of Kashmiri kings from 3120 B.C. to 1445 B.C. Unfortunately, most of the old Hindu books in Kashmir were destroyed in the fourteenth century by the Tartar invader, Zulzer, whose work of devastation was carried farther by Sikander the Iconoclast. Only a few old manuscripts escaped. The earliest legends surviving are Hindu, but we do not know when that cult made its appearance in Kashmir. Some Kashmiri Hindus claim that certain massive temples in their land were built by giants or by the gods.

Possibly two or three centuries before the Christian era Buddhism made its appearance in Kashmir, but by the middle of the seventh century A.D. monasteries were few and Buddhists were moving eastward into Tibet and across China. Then came a period of control by Hindu kings, followed by the Tartar Invasion. In 1323 Mohammedan rule began

and, with a brief interruption, continued for nearly four hundred and fifty years. Afghans and Sikhs had in turn oppressed the country for short periods when, in 1846, Kashmir was ceded to the British Government by the Sikhs, in place of war indemnity. Under British direction came peace, reform, and development of natural resources, together with the introduction of many institutions for the uplift of the people.

The people of Kashmir, usually of light brown complexion, are often dirty in appearance. Their loose shirts, with wide sleeves originally white, soon take on another color. A woollen blanket is thrown about the shoulder, while short trousers and straw sandals complete the costume for the men. The women wear caps with cloths attached that serve as veils, and dark blue gowns stamped in red. Officials and other persons of position dress more pretentiously. Many wear charms, such as leopards' claws or metal ornaments. The people are usually happy and good-tempered. They are strong physically, but nervous, and will often weep on slight provocation. They have a fairly well developed moral sense, are affectionate in their homes, and attentive to sick relatives. Their mud houses are without chimneys, and in consequence are smoke-begrimed. Their language is of Hindu origin. In religion, more than nine-tenths are Mohammedans,

the remainder being Hindus. In general they are grossly illiterate. Such were the people to whom Arthur Neve, M.D., was sent by the Church Missionary Society, in 1882.

Arthur Neve was born in Brighton, England, in 1858, and in time he studied medicine at the University of Edinburgh. While yet a student, David Livingstone's life appealed to him strongly, and he decided to volunteer for service in Africa. Suddenly, however, the Church Missionary Society was confronted with an urgent need for a medical man for Kashmir, to take charge of the hospital at Srinagar. Dr. Elmslie, the first medical missionary ever appointed by the Church Missionary Society, had died, and his successor, Dr. Maxwell, had broken down in health a year or two later. A third medical missionary, Dr. Downes, was retiring on account of ill health.

The Kashmir Mission had been opened about 1863 by the Rev. Robert Clark. The first attempt at medical mission work met with great opposition. The governor and other officials were antagonistic and apparently permitted, if they did not incite, mob violence. In 1864 Mr. Clark made the following entry in his diary:

"The house was literally besieged with men and noisy boys. They stood by hundreds on the bridge, and lined the river on both sides, shouting, and one

man striking a gong, to collect the people. Not a *chuprasse*, or police officer, or soldier, or official of any kind appeared. The tumult quickly increased, and no efforts were made to stop it. The people began to throw stones and some of them broke down the wall of the compound and stables. Our servants became greatly alarmed, for they threatened to burn the house down. The number present was between one thousand and one thousand five hundred. When I went to the Wazir to ask for protection, it was said that he was asleep. He kept me waiting for two hours and then did not even give me a chair. He promised to send a guard and never did so. The police also announced that if any one rented a house to the missionaries, all the skin would be taken off their backs."

A few weeks later Mr. Clark wrote in his journal:

"Men are again stationed on the bridge, as they were for weeks together last year, to prevent any one from coming to us. Our servants cannot buy the mere necessaries of life, and we have to send strangers to the other end of the city to purchase flour."

For several years Dr. Elmslie received treatment similar to that accorded Mr. Clark, and the opposition to medical missionaries yielded slowly. However, when Dr. Arthur Neve arrived, he found the

hospital established and the doors for service wide open in every direction. His predecessors' unselfish labors for the sufferers in Kashmir had overcome much of the prejudice.

Dr. Neve was thrilled as he crossed the mountain range and enjoyed his first panorama of the Kashmir Valley. At the summit of the pass he stood entranced. What a vision of grandeur he beheld! Twenty miles to the north the peaks, covered with snow and glaciers, rose to enormous heights, orange and pink in the afternoon sun, and fading into purple in the shadows of the valleys. Wular Lake, far down in the emerald valley, reflected the surrounding glory, and the wilder regions of the Himalayas to the east seemed to be calling him already to explorations which he was to attempt so often in the future. But if the young missionary expected beauty and purity everywhere in the romantic Vale of Kashmir, he was quickly disillusioned upon arrival at his station.

The capital city, Srinagar, is surrounded by scenes of Alpine beauty. The Kashmir Mission Hospital, perched on a jutting hillside overlooking the city, commands also a view of a vale of purple glens and clear, snow-cold streams. Srinagar has a population of 126,000 people, living in crowded houses, and using for their chief and central highway the Jhelum River, with intersecting canals that

would make of Srinagar a second Venice, if people and architecture only lent themselves appropriately. While Srinagar has been called "The City of the Sun," it has also been suggested that it might be called "The City of Appalling Odors." The dense population is ignorant of sanitation. The drainage of a city without sewers runs into stagnant canals in which people bathe and wash their clothes, and from which women fill their jars with water for drinking and cooking. Portions of the crowded city never receive a direct ray of sunlight, and in consequence there is a deposit of vile black mud in winter and nothing less than a riot of pestilential odors in summer.

In 1886 Dr. Arthur Neve was joined by his brother, Dr. Ernest F. Neve, who had also studied at the University of Edinburgh, where he established a record for thorough work in his classes, activity in religious organizations, and service for the poorer classes. The younger physician declared that Srinagar, from a sanitary standpoint, was like a powder magazine waiting for a spark.

The spark fell into the magazine a few months after his arrival, when a case of cholera appeared in the city, and soon he and his brother and the Superintendent of the State Hospital were face to face with a baffling situation. When the outbreak occurred, the Mission Hospital was crowded with

more than a hundred patients, while great numbers daily thronged the waiting-rooms. On one day alone the two doctors admitted thirty patients to the hospital and performed fifty-three operations. Two of the patients died from cholera, and in a few hours the hospital was empty. The people were panic-stricken. In two months, more than ten thousand died in the city. Dr. Ernest Neve, cooperating with the state physician, took charge of a large section of Srinagar; and Dr. Arthur Neve visited almost every section of the valley (nearly ninety miles long) where deaths were reported. Wherever pure water could be secured in good supply, the people escaped to a great extent. To teach the populace a few simple principles of safeguarding their health by suitable food and water was the privilege of the physicians.

Srinagar suffered again and again from the scourge of cholera. In reporting an epidemic Dr. Arthur Neve wrote:

"The turbid and lazy stream sweeps against the prow masses of dirty foam, floating straw, dead bodies of dogs, and all other garbage of a great city. How can one admire the great sweep of snow mountains, the deep azure of the sky, and broad rippling sheet of cloud and sky-reflecting water, when every sense is assailed by things that disgust. Upon one bank stands a neat row of wooden huts,

This is a cholera hospital. Upon the other bank the blue smoke, curling up from a blazing pile, gives atmosphere and distance to the rugged mountains. It is a funeral pyre. And as our boat passes into the city, now and again we meet other boats, each with its burden of death. All traffic seems to be suspended. Shops are closed. Now and again, from some neighboring barge, we hear the wail of mourners, the shrieks of women as in a torture den, echoed away among the houses on the bank."

In 1885 the Kashmir Valley was shaken by a terrific earthquake. It was most violent near Baramula, where villages were reduced to ruins and thousands of persons were killed outright. In one hamlet only seven of the forty-seven inhabitants survived, and four of these seven were severely injured.

Immediately after the earthquake, Dr. Arthur Neve hastened to Baramula and opened an emergency hospital. Other missionaries visited the devastated district to collect in boats the wounded who could be taken to Dr. Neve. In two weeks' touring, they visited villages where the roll of the dead included not less than three thousand. Besides the dead, there were many injured whose cases became more serious daily, as bones began to knit in unnatural forms, dislocations to stiffen, and wounds to mortify. Such service as was rendered by the

missionaries could not fail to reach the hearts of the distressed people.

In times of special need, the missionary staff at Srinagar could always rely on the help of the older boys in the Mission School which, by 1912, enrolled about fifteen hundred students of varying ages. Dr. Elmslie, the first medical missionary in Kashmir, had begun the educational work. Fortunate the mission whose pioneers are wise enough to establish good schools and thus prepare the native forces for leadership in Christian movements in their own lands! The Kashmiri boy was not an encouraging subject for Christian education, but Dr. Elmslie and his successors,—such men as the Rev. C. E. Tyndale-Biscoe and the Rev. F. E. Lucey—had faith in the power of the gospel, taught through daily example as well as by precept, to transform the characters of the unpromising lads of the Kashmir Valley. "In all things be men," was the inspiring motto of the school. A pair of canoe paddles, crossed, was the crest. The paddles signified hard work, or strength. The paddle blades, in the shape of a heart, suggested kindness; for true manhood was described by the teachers as a combination of strength and kindness. The crossed paddles suggested the Christian symbol of self-sacrifice and was intended to remind them from Whom they should seek inspiration to be true men.

Throughout the city, schoolboys might be seen wearing this badge, and any one in danger or distress might appeal to them for assistance, since they had been taught to be ready always to serve those in special need. Their sports at school were taught not for their personal pleasure, but to make them stronger in the service of the weak. One of the practical results of the aquatic sports was the saving of eight lives in a single year. If a conflagration was discovered in the city, the school was quickly dismissed for the day, while the principal and his boys hurried to the fire, taking along the fire-engine from the mission-compound and fighting the flames, thus saving the lives of women and children.

The boys were taught to protect women from insult, to show kindness to invalids and old people, and to prevent cruelty to animals. One winter a hundred starving donkeys were fed by the boys. Occasionally, a sanitary corps would visit some especially unwholesome section of the city and, with pick and shovel, show what was required to prevent the spread of disease. Convalescents from the hospital were taken out on the lake for an airing. The boys assisted the police in running down gangs of men who terrorized women and children, and they held boat-races on the river when cholera raged, in order to enliven the people and relieve their mental tension. Once, when told that the plague offered

many opportunities to them to play the man, the boys actually gave three cheers for the cholera! When floods swept the valley, they rescued families that were stranded on roofs of houses or on small spots of dry ground. Native teachers in the school gave their personal assistance to the medical missionaries in caring for cholera patients. The big task which Mr. Tyndale-Biscoe undertook was "to teach the boys manliness, loyalty, charity, manners, cleanliness, truth, and Christian doctrine."

The Englishman's determination to take an occasional vacation is a saving grace. The strain of hard labor is relieved and usefulness is enhanced if one knows how to throw aside his usual cares and enjoy new surroundings. Both of the Neves loved the mountains. Dr. Arthur Neve used his first vacation to "spy out the land" as a missionary, and also to gratify the love of exploration which had been calling him, from his first day in Kashmir, to journey over some of the highest mountain passes and to place his feet on summits never before scaled. Dr. Ernest Neve made a record for more "first ascents" than any other person in Kashmir.

On the first of his many adventures, in scrambling over the glaciers and scaling the peaks far up the Himalayas, Dr. Arthur Neve took along, besides porters, a cook, and a stalwart Sikh, a trained

hospital assistant, to help in compounding medicines for sick persons encountered in the villages. It was a relief to the missionary to get out into the silent places of the world and to make friends with birds and flowers and glaciers. It was thrilling, too, to stand on snow-fields several miles higher than the level of the sea, and hear every few moments the crash of ice, as thousands of tons, in a single mass, would be loosened from a glacier and strike against mountainsides with thunderous roar; or to listen to the reverberations from peak to peak of the report of cracking glaciers.

The first climb up Alampi Pass was long but increasingly inspiring. It appeared more beautiful than anything Dr. Arthur Neve had seen in Switzerland. The great charm was in the wild, untrammeled freedom of it all. Man seemed not to have touched it anywhere. There were no artificial paths and no bridges except where ice spanned a stream.

Dr. Neve wrote:

"I had been as a lad on the Breuva glacier, and had seen the huge snow slopes and ice cliffs on the east face of Mont Blanc, but Nanga Parbat is infinitely more stately and impressive . . . Three great glacier-rivers pour their cascades of ice into the Rupal Nullah. A boulder started at the summit would break to pieces in the fall, but the fragments would only come to a rest 15,000 feet below."

On this first adventure, he was satisfied to stop on the top of the pass, nearly 17,000 feet above sea-level, and view the peaks towering above him. That day he saw Nanga Parbat, 26,620 feet high. Later, he slept one night at an altitude of 17,000 feet; and the next day the party pressed on with axes and Alpine ropes, up to even greater heights of stone and snow and ice.

"I found a bridge of thin new avalanche snow," Dr. Neve's journal for that day chronicles, "and tried to get over it by crawling. It broke away under me and I was hauled up . . . Several times during the day pieces of the cornice 1,000 feet above us broke away and caused small avalanches. Again I tried to the left, but obviously no old snow-bridges could be expected, and the thought of our porters and servants demanded retreat."

Many were the expeditions into the mountains that renewed the strength of the missionaries for further service in Srinagar, with its careless people and its fetid odors. And in time the fame of the brothers had spread over Kashmir so widely that wherever one of them camped overnight, unless it were too high for permanent human habitation, the sick, the blind, and the lame, came to him for treatment. Such occasions were used, also, to tell the people of the Healer of Souls, for both men were constrained by the love of Christ and felt that they

must witness for Him by word as well as by deed.

The work of the two brothers grew apace. In the year 1899 no less than 35,000 visits had been registered at the hospital, besides patients seen in the villages when camping. Some came from the balconied houses overhanging the canals, the homes of the well-to-do; others came from the Rajah's family or the homes of Mohammedan mullahs. Most of them came from "the narrow, crowded alleys where the sun scarcely penetrates, and courts where the festering heaps of filth poison the air; quarters of the town where disease is ever rampant, and epidemics are bred."

A large proportion of the medical cases were from the city, but most of the surgical cases came from the villages, of which there were thousands on the plains and hillsides. Mountaineers came over the snowy passes in summer, or sent their sick. Even in remote Baltistan, more than a hundred miles north of Srinagar, the hospital, its Christian physicians, and their sister, Miss Nora Neve, who became Superintendent of Nurses at this station of love and mercy, were known. Discharged patients returned to little groups of neighbors in many sections of the country to report what they had seen at the Mission Hospital, and perhaps to repeat the messages they heard there of Him in whose name it was all being done.

Although the work at the hospital was always heavy, both doctors considered it advisable to go out occasionally on camping trips, not only for recreation, but in order to get close to the people by living among them, and to minister to many who would never come to Srinagar. They would place medicines, surgical instruments, dressings, tents and bedding aboard a flat-bottomed boat, and drift down the river, paddle across Wular Lake, and secure porters to carry the baggage over the mountain passes. On one such trip, after walking through forests where the bear and leopard, as well as troops of monkeys, made their home, Dr. Ernest Neve took up his quarters in a log hut with a flat earthen roof, on the border of dense stretches of pine, cedar, and spruce, and close to groves of walnut trees sheltering other dark brown huts, where the people lived on the borders of their flooded rice-fields.

At such a time it is quickly noised about that one of the far-famed doctors of Srinagar is in the hut on the edge of the forest, and early next morning a hundred and fifty or two hundred country people are to be seen among the pine trees, waiting for a man of whose ability to heal the sick they have heard. The medicines and instruments are arranged on a table, while the peasants gather in a semicircle facing the doctor and his native assistants. Dr.

Neve tells them of the purpose of his visit; that he has come down from the hospital at Srinagar hoping to help those who are sick. Possibly several in the group remark that they have been to the hospital, where they were well treated and where they recovered. The kindly doctor tells them, too, that he has come to give them the good news of the gospel of Christ, and then he reads a few verses of Scripture, commenting in simple language on the old story of man's sinful condition, God's love for sinful men, and Christ as the Savior from sin. He tells them that his work at the hospital and in the villages is Christ's work, for it is done by one of His disciples, at His command, in His name, and for His honor. Then, after a brief prayer, the medical work is begun and is continued until all have received treatment.

Interest becomes intense whenever chloroform is administered, and a hush falls over the crowd. Possibly they regard it as some kind of mystic rite. The next day the attendance is larger still, and so on, day after day, until the crowds become almost unmanageable. Then the camp is moved over a high mountain-pass into another valley, for the gospel must be preached in other villages also.

It is regrettable that the stories of thrilling adventure and of unselfish services rendered on various journeys by both men, can be barely mentioned

here. Each missionary found delight in scaling high mountain peaks, while the journeys to Tibet furnished excellent opportunity for exploration among the ice crags. Dr. Arthur Neve camped one night on his journey thither at an altitude of 19,000 feet, where water boiled at a point a trifle below 180 degrees. Another night he camped among ice and snow at 20,000 feet, where the boiling-point was 178 degrees. Frequently he found himself among peaks more than 25,000 feet high.

At last he reached Leh, the chief market of Western Tibet, where traders from China, Russia, and India meet for an exchange of wares. The streets of this remarkable town in the desert, the meeting-place of the Aryan and Mongol races, are full of picturesque characters. Leh is also the center of Lamaism, a variety of Buddhism. Numerous Buddhist images and monasteries are seen in that region. One monastery at Hemis, twenty miles from Leh, shelters about 300 Buddhist priests and is famed for its Devil Dance. The object of this dance seems to be to illustrate the struggle of demons for the soul of man and the value of intercession by the priests. Each of the doctors from Kashmir was made welcome, at different times, by the monks in their massive dwellings on the barren hills, which the visitors found full of interest. Of one of the monasteries Dr. Ernest Neve wrote:

"Time fails to tell of all the wonders we saw—the steep stairs and ladders, the tunnel-like passages, giddy precipices, curious little cells and fierce Tibetan mastiffs, the rows of prayer cylinders, the painted stones, and, strangest of all, the large wall frescoes of hideous demons."

On the journeys to Tibet there were numerous occasions for preaching the gospel through interpreters and for practising it in unselfish service, which is its own interpreter. The Christian missionaries rejoiced at every opportunity to serve the Buddhist monks. Many of the priests had cataracts removed from their eyes, and besides restoring physical sight, doubtless many were made to see more clearly the nature of the Christ whose messengers had served them so effectively.

One time, as Dr. Arthur Neve was leaving Tibet, three blind women at the wayside, one evening at dusk, begged him to have mercy on them. He told them to go to the Moravian Mission Hospital at Leh, where he had been so warmly received by the seven missionaries at this remotest outpost of Christian missions in Central Asia. The women asked him if they, blind, could be expected to go over a high mountain pass. The argument was conclusive. "Come at daybreak," was the reply.

The three blind women waited patiently all night, and for breakfast they had no food but a little raw

dough. When daylight came, the doctor found he had no way to sterilize his instruments. For some reason, no fire and no matches were at hand. Flint and steel were not sufficient to ignite wet wood. At last, fraying out part of a shirt, and using powder and flint and steel, a fire was lighted under a cooking-pot in which the instruments were boiled. Kneeling in the sand, the doctor removed cataracts from the eyes of the three patient women, before hastening on his journey back to Kashmir.

Doctors Arthur and Ernest Neve and their devoted sister have built wisely and nobly on foundations which were laid by their predecessors; laid securely, in spite of opposition that finally melted in the presence of unselfish Christian love. The first mud buildings have been replaced by substantial structures whose wide verandas, graceful towers, and red roofs and gables break the line of green foliage for nearly a quarter of a mile, on a high ridge overlooking the city and valley. The Red Cross flag, waving over the buildings, has sent a message of cheer and love to thousands of persons.

The splendid work done in this distant city is worthy of all praise. Year after year thousands of sufferers go to the hospital for relief. As long ago as 1912 it was estimated that, since the work was begun in a small way in 1865, more persons applied to the hospital for help than there were inhabitants

in the great and famous Valley of Kashmir. In ten years, as many as 400,000 came to the hospital for medical aid, while 14,500 patients were treated in the hospital wards. It is not uncommon to find persons from more than a hundred different villages among the hospital patients of a single day. Some of the patients are brought to the hospitals on house-boats that ply up and down the Jhelum River and through a maze of intersecting canals.

It is a pathetic line of humanity that daily makes its way up that hill of hope, and waits under the shade of the trees until the doors of the hospital are opened. Some are carried in beds or chairs. Others climb the steep in pain. When the doors are opened, the waiting-room is soon packed with sufferers. The babel of voices subsides as the doctor appears and reads a story from the Gospels which he afterward explains. A brief prayer follows, after which the medical and surgical work begins. The doctors, nurses, and thirty assistants deal as effectively as possible with all who come. As many as seventy operations, of varying degrees of difficulty, have been performed in a day, and as many as four hundred ordinary patients have been treated in the same period. There is also a hospital for lepers, with an average of ninety inmates, where everything possible is done for their comfort, and where they are given the consoling teachings of the

Savior concerning the life beyond. This leper hospital is largely supported by the Maharajah. The medical missionaries are glad to give their services in this attempt to furnish comfort and cheer to sufferers from such a dreadful malady. Much, too, is being done to stop the spread of this disease.

Although the work was begun in the face of extreme opposition, even the Moslems, who are usually fanatical in their attitude in other parts of India and elsewhere, now are friendly around Srinagar and speak in such words as these: "Your religion, Sahib, is really the same as ours. You have the Law and the Gospel, which we also acknowledge, and we read the creed of the Holy Jesus."

But prejudice is strong against a change in religion. Nevertheless, the leaven is at work. In one year the gospel was preached by members of the mission staff in as many as fifty villages around Srinagar, and there were few towns that had not sent patients to the hospital. The missionaries believed in "the policy of having well-manned, adequately equipped institutions." They wrote to their Board: "In the long run, such work not only goes deeper, but spreads wider than an equal amount of effort expended in a desultory manner over the whole Kashmir territory of 68,000 square miles."

May many years be added to the fine record of

the two brothers and their sister, in their labor of love for an unprogressive people in one of earth's most beautiful regions. The Kingdom of Christ on earth is hastened by the work of three such devoted disciples.

X

JOHN SCUDDER

X

JOHN SCUDDER

IT is always interesting to discover the fountain head of a great stream, hidden perhaps in a glacier far up on a mountainside. Likewise, there is profit in tracing any large and helpful movement of modern times to its origin. To-day medical missionaries, on errands on healing for body and soul, are found in every clime, and their name is legion. Where and when, in human history, did this great and beneficent mission have its beginning?

We can be sure that the name of the first medical missionary in the modern movement was *John.* But was it John Thomas, John Vanderkemp, or John Scudder? John Thomas, a ship's doctor, had left his vessel at Calcutta, for the purpose of preaching the gospel to the people of India, some years before William Carey began his work. Then John Vanderkemp, of Holland, a physician of considerable reputation, who had been living in retirement for several years, was appointed in 1798 by the Missionary Society in London, for services in South Africa. But in the case of neither John Thomas nor John

Vanderkemp did a knowledge of medicine appear to have influenced the appointing Society. Nor is there evidence that either man was expected to use his medical skill in the discharge of his duties as missionary. It seems clear that each one of these men considered he had turned aside from medical work, in order to preach the gospel. Each, however, may have practised medicine and surgery incidentally, as circumstances required. But it appears that John Scudder was the first missionary ever appointed because of his training as a physician, as well as because of his desire to proclaim the gospel.

The American Board of Commissioners of Foreign Missions had been in existence only a few years, when it realized the importance of sending out men who could follow Christ's example in healing the sick. Accordingly, the Board advertised for one who could qualify both as an evangelist and as a physician, for work in Ceylon. The appeal was read by Dr. John Scudder, a prosperous physician of New York City, whose missionary enthusiasm was already at white heat from having read a leaflet shown him by one of his patients. The leaflet was entitled "The Conversion of the World, or the Claims of Six Hundred Millions."

This unexpected appeal for the dedication of his knowledge of medicine and surgery came to a man who from boyhood had been sensitive to the whis-

perings of duty. The parents had dedicated John Scudder to God a few months after his birth, on September 3, 1793, at Freehold, New Jersey. The father, Joseph Scudder, was a lawyer of repute and a gentleman of the old school. The mother, Maria Scudder, was a woman of exceptional culture, piety, and winsomeness, whose family had made a gallant record in Revolutionary days. His mother's Christian character and the sturdy qualities of his grandfather were perpetuated in the child. As a lad, John Scudder would run about the streets of Freehold, gathering sticks for the fires of the poor. Once, when tugging at a heavy piece of wood, some one called to him, "John, what are you going to do with that?" He replied, "I am taking it to Miss Becky, who has no fire."

At Princeton College, young Scudder had manifested deep interest in the conversion of his fellow-students. He wished to enter the Christian ministry, but his father objected, and he therefore decided in favor of medicine rather than law. In time, he was graduated from the New York Medical College, and he secured considerable professional training as resident physician at the Almshouse. This was followed by a few years given to general practise. Such was the preparation of the man who read the advertisement of the American Board. Indeed, he had been yearning for an opportunity to serve

Christ in foreign lands, and the need in Ceylon appeared to be a providential opening.

There were difficulties to be met. He had married a lovely young woman who probably had never given a thought to missionary service. In time, however, she responded nobly to the plan which so engrossed her husband. Some of his friends declared he was insane to think of leaving his established practise in New York to devote his life to "the heathen." A little daughter, two years of age, had to be considered, also; nevertheless, he offered himself and was accepted by the American Board, under whose auspices he served until his own denomination, the Reformed Dutch Church, organized its foreign mission work.

Preparations were presently made for sailing. A faithful colored servant, Amy, refused to be separated from the family. When told of the hardships of missionary life, she was quite unmoved, and she pleaded to be permitted to go with them. By a special arrangement with the Board, this devoted woman sailed with the first medical missionary family leaving American shores, and for many years she rendered valuable service in the Scudder home in India.

A farewell to missionaries was not so common a hundred years ago as it is to-day, when thousands of them are sailing every year. When Dr. and Mrs.

Scudder left for Ceylon, it was not the plan of Mission Boards to allow furloughs, and those who left America on such errands expected never to return to their native shores. Naturally, those who gathered in New York, at the Fulton Street wharf, to bid adieu to the party leaving for Boston, from which port they were to sail, were deeply moved. A young Christian merchant who witnessed the event wrote in his diary as follows:

"This morning I saw a missionary and his wife take their departure for India. I had the pleasure of being introduced to them. Dr. Scudder appeared cheerful, Mrs. Scudder was bathed in tears, but yet rejoicing. They were surrounded by many friends, and we can with difficulty imagine their feelings as one and another said, 'My friends and sister, farewell forever.' I shall never forget Dr. Scudder's look nor his words. His eye kindled and his cheeks glowed with ardor. As the vessel moved off, waving his hand, with a benignant smile on his countenance, he said, "Only give me your prayers, that is all I ask.'"

The young merchant was so deeply moved by what he had seen, that he gave up his business to enter Princeton to prepare himself for missionary work. Unfortunately, he died before completing his preparation.

Besides Dr. and Mrs. Scudder, little two-year-old

Maria, and black Amy, three other missionary families—Messrs. Winslow, Spaulding and Woodward and their wives,—sailed from Boston on June 8, 1819, on the brig *Indus*. The ship was commanded by a stalwart Christian, Captain Wills, who "put the whole ship at their command, as a floating Bethel." On Sunday morning there was public worship in the cabin, and afternoon services were held on deck. Morning and evening prayers were conducted daily. A conference was held every Thursday evening, a prayer-meeting once a month, and a theological class every afternoon. In private rooms there were numerous services of prayer. It was not expected that the seamen would find delight in the passenger-list of the *Indus* on this voyage, for such a program of meetings on a steamship in these days would not be suggested by the boldest of travelers. But very soon the seamen began to ask, "What shall we do to be saved?" and presently a revival of religion was experienced aboard ship.

The officers and sailors attended some of the meetings and showed a deep personal concern. Before the sailing-vessel completed its four months' voyage, the first and second officers of the ship, the clerk, the cook, the steward, the carpenter, and most of the seamen had signified their acceptance of Christ. Dr. Scudder wrote his mother: "I believe there was not a thoughtless sinner on board

I have been in revivals of religion at home, but never did I see such manifestations of divine power." To him it was a matter for deep satisfaction.

For some reason, probably unfavorable winds, Captain Wills was unable to take his vessel to Ceylon direct, so the entire party landed first at Calcutta, where the luxuriance and freshness of the vegetation fascinated the passengers who, for four months, had seen little besides sky and sea. From the deck of the *Indus,* ascending the River Hugli, the missionary party looked upon the native's bamboo huts in the midst of palm trees, cocoanut groves, and the spreading banyan. However, their eyes fell on other scenes as well,—on some that revealed the need for their mission to India. Of such scenes one of the party wrote:

"Soon after the ship anchored, we saw on the shore, directly opposite to us, great multitudes approaching the water, with a horrid din of music, carrying their gods to throw them into the stream. We could discern nothing of their appearance but that they were the size of a common man, and about the waist were painted black. They were held over the water some minutes, while the noise of various musical instruments continued, and then plunged in, to float down with the current. This drowning, or bathing, ceremony of the gods is an important ceremony among the Hindus."

While waiting at Calcutta for a ship going to Ceylon, Dr. and Mrs. Scudder formed the acquaintance of William Carey and other missionaries. Here, too, came the first severe trial of their lives. Little Maria died after an illness of only three days. Three months later, in Jaffna, a similar affliction overtook them in the death of a babe only seven days old.

Ceylon is one of the rich gems of the Orient. The great island is beautiful in its wealth of cinnamon groves, cocoanut forests, palms, and rice fields. Dr. Scudder found in Ceylon a population of about a million souls, composed chiefly of Cingalese in the interior and southern sections, and Tamils in the northern and eastern districts. The Cingalese are Buddhists; the Tamils are Brahmins or Hindus. The new medical missionary family was sent to Panditeripo, in the Jaffna district, the extreme northern point of Ceylon, where deserted posts, once occupied by Roman Catholic missionaries from Portugal, offered excellent opportunity for work. In July, 1820, Dr. and Mrs. Scudder settled at Panditeripo and began at once to repair the dilapidated properties that had been abandoned by the Portuguese.

Although appointed as a medical missionary, Dr. Scudder was zealous in preaching the gospel. He had studied theology aboard the *Indus* and, im-

mediately upon acquiring some knowledge of the language of the people, he began to preach to them. In May, 1821, he was ordained to the gospel ministry.

The utter degradation of the people of Ceylon appalled him, and at times it was difficult to assure his soul that they could experience spiritual regeneration. He wrote home, "Were it not for the hope that the day is approaching when the heathen shall be given to the Lord for his inheritance, and the uttermost parts of the earth for His possession, my heart would sink within me." Yet still he toiled on, undismayed.

It can be easily understood how one holding such intense convictions would feel that every hour must be given to the proclamation of the gospel. Yet time was needed for his medical work. Early every morning he prescribed for the sick. The only physician in a great area, the people came to him in large numbers, when his skill became known. Surgical operations seemed miraculous to the people of Ceylon, and when they saw Dr. Scudder use the knife with such marvelous results, they sometimes proclaimed him superior in healing power to their greatest divinity. He regarded his medical work as a means to a greater end, and all who came to him heard him pray and tell of One who came to save them from eternal pain and misery worse than phy-

sical illness. Tracts were given to all who could read.

Dr. Scudder was not satisfied to reach only those who came to him. He went from house to house for personal conversation. He undertook tours into country districts, preaching as he went, and always carrying medicines and surgical instruments in order to help the suffering. He journeyed through areas infested with dangerous wild animals and serpents, yet he never was molested. He seemed to be divinely protected. Occasionally he was stoned or ridiculed, but not often. Usually the people welcomed him. Along the wayside he told farmers, fishermen, carpenters, and beggars, as they followed their various occupations, of the love of God revealed through Christ. He was a constant and a hard worker. "Eternity will be long enough to rest in," was one of his sayings. He was burning out his life, but he fed a flame whose light will fall on human paths for generations yet unborn. And in the midst of all his activity, he found time for unhurried periods of prayer, Bible study, meditation, and praise. Fully two and a half hours every day were given to such periods, and every Friday the entire morning was devoted to fasting and prayer. We, who live in a day of vaunted "efficiency," may be failing even to approach in usefulness the men who found strength by

frequent prayer. Their lives were charged afresh with divine energy. Perhaps the "old-school missionary" was wiser than those who follow him.

Mrs. Scudder, also, became a missionary of the noblest type. Despite the care of her family, she assisted in the schools, taught the women to sew, visited the homes, took charge of the entire mission in the doctor's absence, and furnished a large measure of the inspiration that made their household one of the most notable in the annals of missions. Meanwhile, old black Amy was a constant comfort to all in the house. Perhaps her labor as an unassuming servant made it possible for this home to be maintained so long in the Orient, and under conditions so favorable to its far-reaching usefulness. She, also, must be counted as a missionary, possibly the first of her race.

With the same unbounded zeal which took him to the mission field, Dr. Scudder undertook to do far more than was safe for any white man living in the tropics; and during his early years in Ceylon he made long tours on foot that prostrated and weakened him to such an extent that he never fully recovered. By the autumn of 1829 it was evident that his condition required rest and a change of climate. He was finally induced to go to the mountains on the west coast of India. Just before he left his station, forty-one persons united with the

church, which gladdened his heart as he started in quest of health.

When Mrs. Scudder saw how the work at Pandeteripo would suffer if no missionary remained to give it attention, she bravely decided to remain there, although she shrank from the thought of living there alone. Almost a year later the doctor returned, improved in health, but not entirely recovered. While on his visit to continental India, he was impressed with the vastness of that field, and in a few years he and the Rev. Myron Winslow were allowed by their Board to locate at Madras and establish work in that great city. Madras is about two hundred and fifty miles north of the Jaffna district, on the eastern shore of Peninsular India. It has been the scene of many stirring events in other days, and was a meeting-point for Oriental splendor and British commercial and military life. This appealed to Dr. Scudder as a great base for missionary activity, with the almost countless towns and villages adjacent and easily accessible. Here he began work of a new kind.

He early recognized the importance of Christian literature as a Christianizing agency, and Dr. Scudder's letters indicate that his chief aim in going to Madras was to establish a press for the purpose of printing the Bible and general Christian literature for distribution, in large quantities, among the Tamil

people. But he was not satisfied to stay in Madras all the time. He traveled among the villages, preaching and distributing literature, with the help of native assistants; and though he was sometimes welcomed, there were occasions when he was treated with scant courtesy. Of one of these tours he wrote to his father: "I was not long since stoned, and the soreness of the bruises continued for some time. We should soon be torn to pieces, could the desire of many be gratified." On one of his journeys he gave away eight thousand bound volumes of tracts and five or six thousand copies of the Gospels.

At this period, his letters seldom referred to his medical work. Here, as in Ceylon, the idolatry of the people oppressed him, and it was his great concern to point them to the "Image of the Invisible God." In earlier years he had asked sun-worshipers why they offered rice to the sun. One man replied, "The sun is a witness of God, therefore we offer him rice." Another devotee said they worshiped the sun because they could not see God, and added: "Suppose my child was sick. If I should come here to tell you of it, and if I could not see you, but could see that young man [meaning the one studying medicine with Dr. Scudder], I would tell him." The people sometimes believed the missionary to be worshiping a book, rather than the God who in-

spired it, since he used it so frequently in the public services.

Once, when journeying through forests and jungles, he was attacked by jungle fever and his death seemed imminent. His wife was urged to travel day and night if she wished see him alive. Accompanied by her little son and native porters, Mrs. Scudder began the perilous journey. Of this trip a friend wrote:

"In the worst part of the jungle road, as night drew on, the bearers became intimidated at the sound of wild beasts roaring after their prey, and suddenly fled, leaving Mrs. Scudder and her little one exposed to the most horrid death, and with none to protect them but Daniel's God. What could she do? There was but one thing. She held her little one by the hand and spent that night on her knees in prayer. She heard the heavy tread of wild elephants, which could have trampled her and her little one to death. Then came the growl of tigers and other ravenous beasts, the sound approaching and then receding. They seemed to be circling around the little spot where she knelt, ready to spring upon their prey. But God . . . sent his angels in answer to prayer to guard these, his dear ones, from the death they dreaded. So they passed the night. Morning came, and the cowardly bearers returned and resumed their burden."

Mrs. Scudder found that her husband's life had been saved, but his health was shattered. He was urged to return to America for a season, but he insisted on remaining in India, although he had served for nearly a quarter of a century in that trying climate. Soon after reaching Ceylon, in 1820, he wrote to his parents, "True it is I long to see you, but this can never again be the case; oh, no; we must dispense with this pleasure until we meet in the great day of account." Nevertheless, he was finally compelled to yield to the judgment of physicians and leave India for several years.

Broken in health, he was not easily associated with the athletic young figure who, twenty-three years before, waved farewell to his friends in America. Still, he was unwilling to retire to some quiet spot for recuperation. If he had only a few years left, he felt he must do all in his power to rouse the next generation of Christians to a sense of obligation to the non-Christian world. He found the adult Christians of that day indifferent to his message; he traveled many miles, during his three years or more at home, addressing young people's meetings and talking personally to boys and girls. In later years, it was not at all uncommon for a missionary candidate, meeting the Board, to relate that his first impressions of foreign missions were received in one of Dr. Scudder's meetings. It is

estimated that he reached a hundred thousand children with his messages. He addressed students wherever the door was opened for him, his visit to Mt. Holyoke Female Seminary being of special significance. This institution, now Mt. Holyoke College, has, for many years, been a power in the mission field.

Meanwhile Dr. Scudder's own family was being trained in the same ways. He had ten children and all of them volunteered to follow in the footsteps of their parents. With the exception of a son who died at school before receiving his appointment, and the four little ones buried in India, all the members of the family were enrolled as foreign missionaries, a remarkable and an unparalleled record.

While at home Dr. Scudder would sometimes exclaim, "There is no place like India. It is nearer heaven than America." He was glad, therefore, when he was permitted, in 1845, to sail for Madras. He appeared to realize that his time was short, yet he spent himself and his waning strength in his usual lavish way. He preached, and prayed, and prepared literature, and was a valued adviser to the younger missionaries. His enlarged acquaintance in America called for a vast correspondence and for contributions to religious papers. At the same time, his letters show that he kept up his medical work during the last years of his life, when he was living at

Madura, to which station he was transferred soon after his return from America. It will sound strange to missionaries of this day to be told that Dr. Scudder's published letters make no reference to either a dispensary or a hospital, nor is it apparent that he asked for such equipment. Like others of his day, medical work with him seemed to have been more or less incidental, and was considered as largely an aid to his program of direct evangelistic effort.

Dr. Scudder's work could not fail to attract the attention of those in power, and he received signal honors from those to whom he made gifts of Christian books. At the same time, the native physicians of Madura, angered because the people flocked to the medical missionary for help, thus reducing their gains, resorted to witchcraft, in the hope of destroying Dr. Scudder's life.

Although the visit to America did him much good, Dr. Scudder's health was never fully restored. He grew weaker after returning to India. His journal reveals his feeling as his eyesight began to fail: "My eyesight has begun to fail, but, though I should become blind, if spared, I trust that I shall be able to preach. My voice is good, and though, under equal circumstances, I should much prefer losing my voice to my eyesight, still, under my circumstances, I would sooner lose my eyesight than

my voice. I could do nothing without the latter." To the last, he had a passion for preaching the gospel.

With failing eyesight came a greater grief,—the death of his wife, to whom he was tenderly devoted. Shortly before her death she confessed that her constant prayer had been that all her children might witness for Christ in India. How her prayers were answered is well known. The husband's grief was almost unbearable, but he sought and found consolation in the Unseen. Then came letters from America announcing that, two days after his wife's death, his son Samuel had passed away at the Theological Seminary in New Brunswick, New Jersey.

The double blow which had fallen on his heart was greater than his soul, in its weakened tenement, could bear; and friends saw that the sunset hour was approaching. A sea voyage was suggested, and he sailed, with his son Joseph, for the Cape of Good Hope, where he landed, in November, 1854. The voyage did him good, but only for a time. On January 13, 1855, he lay down to rest before attempting to speak at a service that had been arranged. He fell asleep quietly and met his Lord.

His body was given burial in South Africa. A few years later the remains were given a final resting-place by the side of his wife in India. The animating desires of their souls were to live again

in the missionary lives of all their children and their grandchildren. On the one hundredth anniversary of their sailing for India, fully a score of their descendants had responded to the Great Commission.

It has been computed that, if the missionary service of Dr. and Mrs. Scudder and their descendants were computed in years, it would cover more than eight hundred years. No less than thirty-one of their descendants have labored in India, and seven other descendants have labored in other foreign fields. This makes a noble and distinguished record.

And what shall be said of those who follow in his train? To-day more than a thousand medical missionaries and over five hundred missionary nurses are conducting nearly seven hundred hospitals and more than twelve hundred dispensaries in earth's most needy lands. These servants of God are offering relief to millions of suffering men and women every year and are pointing them to the Great Physician as one who can meet the needs of their souls.

"He welcomed them, and spake to them of the Kingdom of God, and them that had need of healing he cured."

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